P10000045330

(Re	questor's Name)	
(Ād	dress)	•
(Ad	dress)	
(Cit	y/State/Zip/Phone	> #)
PICK-UP	☐ WAIT	MAIL
(Bu	siness Entity Nan	ne)
(Document Number)		
Certified Copies	_ Certificates	of Status
Special Instructions to Filing Officer:		

Office Use Only



200187942952

200187942952 12702710--01030--002 ***35.00

10 DEC 14 PH 2:

SECRETARY OF STATE
TALL AHASSEE FEORIDA

Manual Change

COVER LETTER

TO: Amendment Section Division of Corporations
NAME OF CORPORATION: S&BLIMOSORVICO INC.
DOCUMENT NUMBER: P 10000045330
The enclosed Articles of Amendment and fee are submitted for filing.
Please return all correspondence concerning this matter to the following:
Seth GISSEN Name of Contact Person
Firm/Company 1550 BISCAYNEBIVE 7200 Address
City/State and Zip Code KMC I ON EGZ @ Bell 50 orth, NET E-mail address: (to be used for future annual report notification)
For further information concerning this matter, please call: Very Merror at (305) 371-4664 Name of Contact Person Area Code & Daytime Telephone Number Enclosed is a check for the following amount made payable to the Florida Department of State:
\$35 Filing Fee \$\ \text{Certificate of Status} \text{Status} \text{Status Filing Fee & Certificate of Status} \text{Certified Copy (Additional copy is enclosed)} \text{Certified Copy (Additional Copy is enclosed)}
Mailing Address Amendment Section Division of Corporations P.O. Box 6327 Clifton Building Tallahassee, FL 32314 Street Address Amendment Section Division of Corporations Clifton Building 2661 Executive Center Circle

Tallahassee, FL 32301



December 6, 2010

SETH GISSON 1550 BISCAYNE BLVD. #200 MIAMI, FL 33132

SUBJECT: S & B LIMO SERVICE, INC.

Ref. Number: P10000045330

We have received your document for S & B LIMO SERVICE, INC. and your check(s) totaling \$35.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

The name designated in your document is unavailable since it is the same as, or it is not distinguishable from the name of an existing entity.

Please select a new name and make the correction in all appropriate places. One or more major words may be added to make the name distinguishable from the one presently on file.

Adding "of Florida" or "Florida" to the end of a name is not acceptable.

The document number of the name conflict is P04000154236 - SB MIAMI, INC..

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6964.

Letter Number: 810A00028222

Irene Albritton Regulatory Specialist II

www.sunbiz.org

Articles of Amendment

Articles of Incorporation

	of		
SAB LIN	NO SOM	evia Inc	
(Name of Corporation as currently filed	l with the Florida	Dept. of State)	
000000	45330		
(Document Number of Co	orporation (if know	/n)	
Pursuant to the provisions of section 607.1006, Florida amendment(s) to its Articles of Incorporation:	Statutes, this Flo	orida Profit Corporation	adopts the following
A. If amending name, enter the new name of the corp	oration:		
SBG M	IAMI	Tuc	The new
name must be distinguishable and contain the word abbreviation "Corp.," "Inc.," or Co.," or the designate name must contain the word "chartered," "professional	ion "Corp," "Inc,	" or "Co". A profession	orated" or the
B. Enter new principal office address, if applicable: (Principal office address MUST BE A STREET ADDR.)	<u>ESS</u>)	NA	
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)			19 pec 14
D. If amending the registered agent and/or registered new registered agent and/or the new registered off		Florida, enter the name	PH 2: 32
Name of New Registered Agent:		N/A	
New Registered Office Address:	(Florida street ac	idress)	
		, Florida	
	(City)	(Zip Code)	
New Registered Agent's Signature, if changing Regist	ered Agent:		
I hereby accept the appointment as registered agent. I a		nd accept the obligations	of the position.

Signature of New Registered Agent, if changing

The date of each amendment(s) adoption:		
	(date of adoption is required)	
Effective date <u>if applicable</u> :	(no more than 90 days after amendment file date)	
Adoption of Amendment(s)	(CHECK ONE)	
The amendment(s) was/we by the shareholders was/we	re adopted by the shareholders. The number of votes cast for the amendment(s) ere sufficient for approval.	
	re approved by the shareholders through voting groups. The following statement of for each voting group entitled to vote separately on the amendment(s):	
"The number of votes	cast for the amendment(s) was/were sufficient for approval	
by	(voting group)	
	(voting group)	
The amendment(s) was/we action was not required.	re adopted by the board of directors without shareholder action and shareholder	
The amendment(s) was/we action was not required.	ere adopted by the incorporators without shareholder action and shareholder	
Dated	12/10/10	
Signature		
sele	a director, president or other officer – if directors or officers have not been ected, by an incorporator – if in the hands of a receiver, trustee, or other court pointed fiduciary by that fiduciary)	
	Seth Gissen (Typed or printed name of person signing)	
	(Typed or printed name of person signing)	
	Director	
	(Title of person signing)	

If amending the Officers and/or Directors, enter the title and name of each officer/director being removed and title, name, and address of each Officer and/or Director being added: (Attach additional sheets, if necessary) **Title** Name <u>Address</u> Type of Action ☐ Add ☐ Remove ☐ Add ☐ Remove ☐ Add ☐ Remove E. If amending or adding additional Articles, enter change(s) here: (attach additional sheets, if necessary). (Be specific) F. If an amendment provides for an exchange, reclassification, or cancellation of issued shares, provisions for implementing the amendment if not contained in the amendment itself: (if not applicable, indicate N/A)