P100000046710

(Re	equestor's Name)	
(Ad	ldress)	
(Ad	ldress)	
(Cit	ty/State/Zip/Phone	#)
PICK-UP	☐ WAIT	MAIL
(Bu	isiness Entity Nam	ne)
. (Do	ocument Number)	
Certified Copies	_ Certificates	of Status
Special Instructions to	Filing Officer:	

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(19/13/12--01011--014 **35.00)

SEP 26 PH 1:48

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, COVER LETTER

TO: Amendment Section Division of Corporations

NAME OF CORPO	RATION: MRP CARE	PENTRY CORP	
	BER: P1000004671		
	of Amendment and fee are su		
Please return all corre	spondence concerning this ma	tter to the following:	
	Domingo Abinade	er	
		Name of Contact Person	n
	AB Multi Services	s and Income Ta	ax
		Firm/ Company	
	8751 Commodity	Cir Ste 7	
		Address	
	Orlando, FL 3281	9	
		City/ State and Zip Cod	e
	E-mail address: (to be us	sed for future annual report	notification)
			······,
For further information	on concerning this matter, pleas	se call:	
Domingo Ab	inador	407	601-6524
		at (407	<u>601-6524</u>
Name	of Contact Person	Area Co	ode & Daytime Telephone Number
Enclosed is a check for	or the following amount made	payable to the Florida Depa	artment of State:
■ \$35 Filing Fee	□\$43.75 Filing Fee & Certificate of Status	□\$43.75 Filing Fee & Certified Copy (Additional copy is enclosed)	☐\$52.50 Filing Fee Certificate of Status Certified Copy (Additional Copy is enclosed)
	iling Address		Address
Amendment Section		Amendment Section	
Division of Corporations		Division of Corporations	
P.O. Box 6327 Tallahassee, FL 32314		Clifton Building 2661 Executive Center Circle	
1 WHATELOSOO, 1 EJ JZJ 17			assee, FL 32301



FLORIDA DEPARTMENT OF STATE Division of Corporations

September 14, 2012

DOMINGO ABINADER AB MULTI SERVICES AND INCOME TAX 8751 COMMODITY CIR - STE. 7 ORLANDO, FL 32819

SUBJECT: MRP CARPENTRY CORP

Ref. Number: P10000046710

We have received your document for MRP CARPENTRY CORP 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 date of adoption of each amendment must be included in the document.

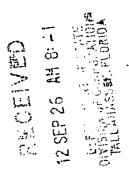
Please check the appropriate box on the amendment form regarding the adoption of the amendment(s).

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

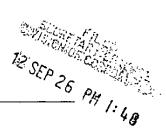
If you have any questions concerning the filing of your document, please call (850) 245-6050.

Irene Albritton Regulatory Specialist II

Letter Number: 612A00023171



Articles of Amendment Articles of Incorporation of



MRP CARPENTRY CORP

(Name of Corporation as currently filed with the Florida Dept. of State)

P10000046710		,	4 9
(Documen	t Number of Corporation (i	f known)	
Pursuant to the provisions of section 607. its Articles of Incorporation:	1006, Florida Statutes, this	Florida Profit Corporation adopts the following	, amendment
A. If amending name, enter the new na	me of the corporation:		
name must be distinguishable and cont "Corp.," "Inc.," or Co.," or the design word "chartered," "professional associat	ation "Corp," "Inc," or "	n," "company," or "incorporated" or the ab Co". A professional corporation name must c P.A."	The new breviation ontain the
B. Enter new principal office address,		901 Hawaii Dr	
(Principal office address <u>MUST BE A S</u>		Ocoee, FL 34761	
 C. Enter new mailing address, if appli (Mailing address MAY BE A POST) D. If amending the registered agent an new registered agent and/or the ney 	OFFICE BOX) d/or registered office add		
new registered agent and/or the nev		<u>.</u>	
Name of New Registered Agent	Ibarra, Omar		
	901 Hawaii Dr	eet address)	
New Registered Office Address:	Ocoee	,	
	(City)	, Florida 34761 (Zip Code)	
Omar		with and accept the obligations of the position.	

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)

Please note the officer/director title by the first letter of the office title:

P = President; V = Vice President; T = Treasurer; S = Secretary; D = Director; TR = Trustee; C = Chairman or Clerk; CEO = Chief Executive Officer; CFO = Chief Financial Officer. If an officer/director holds more than one title, list the first letter of each office held. President, Treasurer, Director would be PTD.

Changes should be noted in the following manner. Currently John Doe is listed as the PST and Mike Jones is listed as the V. There is a change, Mike Jones leaves the corporation, Sally Smith is named the V and S. These should be noted as John Doe, PT as a Change, Mike Jones, V as Remove, and Sally Smith, SV as an Add.

X Change	<u>PT</u>	John Doe	
X Remove	<u>v</u>	Mike Jones	
X Add	<u>sv</u>	Sally Smith	
Type of Action (Check One)	<u>Title</u>	Name	<u>Addres</u> s
1) Change	Р	HERNANDEZ, RICARDO	3208 KNIGHT BRIDGE RD
Add			ORLANDO FL 32818
X Remove			
2) Change	Р	Ibarra, Omar	901 Hawaii Dr
Add			Ocoee, FL 34761
Remove			
3) Change	VP	Gonzalez, Miquel	901 Hawaii Dr.
_ X _ Add		, ,	Ocoee, FC 3476/
Remove			
4) Change	v P	Moveno-Almora, Pedro R.	901 Hawaii Dr.
X_ Add			Ocoee, FC 34761
Remove			
5) Change			
Add			
Remove			
6) Change			
Add			
Remove			

famending or adding additional Arti- Attach additional sheets, if necessary).	(Be specific)
	
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	<u> </u>
f an amendment provides for an exch	nange, reclassification, or cancellation of issued shares,
provisions for implementing the ame (if not applicable, indicate N/A)	ndment if not contained in the amendment itself:
(y noi applicable, malcale WA)	

The date of each amendment(s) a	doption: 50/4 29, 2012
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/were ad by the shareholders was/were s	opted by the shareholders. The number of votes cast for the amendment(s) ufficient for approval.
	proved by the shareholders through voting groups. The following statement reach voting group entitled to vote separately on the amendment(s):
"The number of votes cast	t for the amendment(s) was/were sufficient for approval
by	(voting group)
action was not required.	opted by the board of directors without shareholder action and shareholder
☐ The amendment(s) was/were ad action was not required.	opted by the incorporators without shareholder action and shareholder
Dated	9/12
selecte	director, president or other officer – if directors or officers have not been ed, by an incorporator – if in the hands of a receiver, trustee, or other court inted fiduciary by that fiduciary)
ĺ	Omas Daxa (Typed or printed name of person signing)
	(Typed or printed name of person signing)
	(Title of person signing)