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W. Person

## **COVER LETTER**

TO: Amendment Section **Division of Corporations** NAME OF CORPORATION: **DOCUMENT NUMBER:** The enclosed Articles of Amendment and fee are submitted for filing. Please return all correspondence concerning this matter to the following: Firm/ Company E-mail address: (to be used for future annual report notification) For further information concerning this matter, please call: 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: □\$43.75 Filing Fee & 35 Filing Fee **□\$43.75** Filing Fee & □\$52.50 Filing Fee Certificate of Status Certified Copy Certificate of Status (Additional copy is Certified Copy enclosed) (Additional Copy is enclosed) Mailing Address Street Address Amendment Section Amendment Section **Division of Corporations Division of Corporations** 

**Clifton Building** 

2661 Executive Center Circle Tallahassee, FL 32301

P.O. Box 6327

Tallahassee, FL 32314

## **Articles of Amendment** to Articles of Incorporation of



17 JAN 25 PM 3: 31

ADGRX Tr	χ.
(Name of Corporation as c	Commentive filed with the Florida Dept. of State
Po	000053867
(Document Nu	umber of Corporation (if known)
Pursuant to the provisions of section 607.1006, Florida Statut its Articles of Incorporation:	tes, this Florida Profit Corporation adopts the following amendment(s) to
A. If amending name, enter the new name of the corporat	tion;
	The new
	rporation," "company," or "incorporated" or the abbreviation c," or "Co". A professional corporation name must contain the viation "P.A."
B. Enter new principal office address, if applicable:	7130 SW 44 ST
(Principal office address <u>MUST BE A STREET ADDRESS</u>	
	111/11 00/00
C 10-4	
C. Enter new mailing address, if applicable; (Mailing address MAY BE A POST OFFICE BOX)	7130 SW 44 ST
	MIAMI FL 33155.
D. If amending the registered agent and/or registered offinew registered agent and/or the new registered office:	
Name of New Registered Agent	
(FI	orida street address)
New Registered Office Address:	, Florida
	(City) (Zip Code)
New Registered Agent's Signature, if changing Registered I hereby accept the appointment as registered agent. I am fo	
Signature o	f New Registered Agent, if changing

## 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 <math>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.

Example: X Change	<u>PT</u>	John Do	<u>e</u>		
X Remove	<u>v</u>	Mike Jos	nes		
X Add	<u>sv</u>	Sally Sn	nith		
Type of Action (Check One)	Title		<u>Name</u>		<u>Addres</u> s
1) Change		_			
Add					
Remove					<del></del>
2) Change		_			
Add	,	_		-	
Remove					
3) Change					
Add		<del>-</del>		·	
Remove					
O. O.					
4) Change		_	<del></del>		
Add					
Remove					
5) Change		_	···		
Add					
Remove					
					<del>-</del>
6) Change		_			
Add					
Remove					

E. If amending or adding additional Articles, enter change(s) here:
(Attach additional sheets, if necessary). (Be specific)  ON PG 1. B. IS The New ADDRESS That we are
REQUESTING TO SHOW ON A DOCUMENT.
We are applying for a Dealer license and we are
being told that they need a document Stating
That this New address is the ONE FOR the CORP.
That it shows online is not sufficient.
Thank you for your attention to this matter.
/
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<del></del>
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)

The date of each amendment(s) adoption:	1-25-2017	, if other than the
date this document was signed.		
Effective date if applicable:	1-25-2017 ·	
	ore than 90 days after amendment file date)	
Note: If the date inserted in this block does not meet document's effective date on the Department of State's		date will not be listed as the
Adoption of Amendment(s) (CHECK C	<u>ne</u> )	
The amendment(s) was/were adopted by the shareho by the shareholders was/were sufficient for approva	lders. The number of votes cast for the amendment l.	(s)
The amendment(s) was/were approved by the sharel must be separately provided for each voting group		nent
"The number of votes cast for the amendment(	s) was/were sufficient for approval	
by(voting gro	27	
(voting gro	up)	
☐ The amendment(s) was/were adopted by the board o action was not required.	f directors without shareholder action and sharehold	der
☐ The amendment(s) was/were adopted by the incorporaction was not required.		
Dated	7	
	CS	<del></del> -
Signature		<del></del>
	other officer - if directors or officers have not been r - if in the hands of a receiver, trustee, or other con	
appointed fiduciary by that		uit
	<b>7</b> 3.	
	CHANDO SEMINO	
(Typed	or printed name of person signing)	
	Doce in the	
ů —	PRESIDENT	<del></del>
•	(Title of person signing)	