

P10000055102

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(Business Entity Name)

(Document Number)

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*Amey SL*

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

2010 NOV -8 PM 3:39

FILED

11-8-10

**COVER LETTER**

**TO:** Amendment Section  
Division of Corporations

**NAME OF CORPORATION:** A & B PALLETS REPAIR SERVICES INC

**DOCUMENT NUMBER:** P10000055102

The enclosed *Articles of Amendment* and fee are submitted for filing.

Please return all correspondence concerning this matter to the following:

Domingo Abinader

Name of Contact Person

AB Multi Services and Income Tax

Firm/ Company

121 Webb Dr Ste 100

Address

Davenport, FL 33837

City/ State and Zip Code

abmultiservices1@yahoo.com

E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Domingo Abinader

Name of Contact Person

at ( 407 )

922-9211

Area Code & Daytime Telephone Number

Enclosed is a check for the following amount made payable to the Florida Department 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)

**Mailing Address**

Amendment Section  
Division of Corporations  
P.O. Box 6327  
Tallahassee, FL 32314

**Street Address**

Amendment Section  
Division of Corporations  
Clifton Building  
2661 Executive Center Circle  
Tallahassee, FL 32301



FLORIDA DEPARTMENT OF STATE  
Division of Corporations

November 1, 2010

DOMINGO ABINADER  
AB MULTI SERVICES AND INCOME TAX  
121 WEBB DRIVE, SUITE 100  
DAVENPORT, FL 33837

SUBJECT: A & B PALLETS REPAIR SERVICES INC  
Ref. Number: P10000055102

We have received your document for A & B PALLETS REPAIR SERVICES INC and check(s) totaling \$35.00. However, the enclosed document has not been filed and is being returned to you for the following reason(s):

A post office box is not an acceptable address for the registered agent.

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) 245-6908.

Sylvia Gilbert  
Regulatory Specialist II

Letter Number: 910A00025655

*Sorry for this mistake.*

RECEIVED

10 NOV -8 AM 8:56

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

Articles of Amendment  
to  
Articles of Incorporation  
of

A & B PALLETS REPAIR SERVICES INC

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

P10000055102

(Document Number of Corporation (if known))

FILED  
2020 NOV -8 PM 3:39  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

Pursuant to the provisions of section 607.1006, Florida Statutes, this *Florida Profit Corporation* adopts the following amendment(s) to its Articles of Incorporation:

**A. If amending name, enter the new name of the corporation:**

*The new name must be distinguishable and contain the word "corporation," "company," or "incorporated" or the abbreviation "Corp.," "Inc.," or "Co.," or the designation "Corp.," "Inc.," or "Co.". A professional corporation name must contain the word "chartered," "professional association," or the abbreviation "P.A."*

**B. Enter new principal office address, if applicable:**

(Principal office address **MUST BE A STREET ADDRESS**)

**C. Enter new mailing address, if applicable:**

(Mailing address **MAY BE A POST OFFICE BOX**)

**D. If amending the registered agent and/or registered office address in Florida, enter the name of the new registered agent and/or the new registered office address:**

Name of New Registered Agent:

Griselida Rodriguez

New Registered Office Address:

2255 HWY 17-92 N

(Florida street address)

Haines City

(City)

Florida 33844

(Zip Code)

**New Registered Agent's Signature, if changing Registered Agent:**

I hereby accept the appointment as registered agent. I am familiar with and accept the obligations of the position.

*Griselida Rodriguez*  
Signature of 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)

<u>Title</u>	<u>Name</u>	<u>Address</u>	<u>Type of Action</u>
P	AGUILAR, BERNARDO	2255 HWY 17-92 N HAINES CITY FL 33844	<input type="checkbox"/> Add <input checked="" type="checkbox"/> Remove
P	Pale and Boxes Extraordinary Corp P10000084834 EIN# 27-3706338	2255 HWY 17-92 N HAINES CITY FL 33844	<input checked="" type="checkbox"/> Add <input type="checkbox"/> Remove
			<input type="checkbox"/> Add <input type="checkbox"/> 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)

Pale and Boxes Extraordinary Corp is the new owner of A & B PALLETS REPAIR  
 SERVICES INC by buying all Share to Mr. Bernard Aguilar

The date of each amendment(s) adoption: 10/25/2010

Effective date if applicable: 09/01/2010 (date of adoption is required)  
(no more than 90 days after amendment file date)

Adoption of Amendment(s) (CHECK ONE)

☒ The amendment(s) was/were adopted by the shareholders. The number of votes cast for the amendment(s) by the shareholders was/were sufficient for approval.

☐ The amendment(s) was/were approved by the shareholders through voting groups. The following statement must be separately provided 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)

☐ The amendment(s) was/were adopted by the board of directors without shareholder action and shareholder action was not required.

☐ The amendment(s) was/were adopted by the incorporators without shareholder action and shareholder action was not required.

Dated 10/25/2010

Signature Griselida Rodriguez  
(By a director, president or other officer if directors or officers have not been selected, by an incorporator – if in the hands of a receiver, trustee, or other court appointed fiduciary by that fiduciary)

Griselida Rodriguez

(Typed or printed name of person signing)

President

(Title of person signing)