Note: Please print this page and use it as a cover sheet. Type the fax audit number (shown below) on the top and bottom of all pages of the document.

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(((H16000148227 3)))



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To:

Division of Corporations

Fax Number

: (850)617-6380

from:

Account Name

: FLORIDA MULTISERVICES, INC.

Account Number : 120150000061

Phone Fax Number : (786)290-3319 : (305)645-2035

Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please.

Address:						
	Address:	Address:	Address:	Address:	Address:	Address:

COR AMND/RESTATE/CORRECT OR O/D RESIGN KIKO SERVICES & REPAIRS, INC.

Certificate of Status	0
Certified Copy	0
Page Count	06
Estimated Charge	\$35.00

JUN 20 2016

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Corporate Filing Menu

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COVER LETTER

Division of Cor					
NAME OF CORPO	ORATION: KIKO SERVICES	6 & REPAIRS, INC.	·		
	/BER: P100000970777				
The enclosed Article	s of Amendment and fee are s	ubmitted for filing.			
Please return all con	respondence concerning this ma	atter to the following:			
	ENRIQUE R SANTOS		·		
	 	Name of Contact Perso	on		
•	KIKO SERVICES & REPA	irs, inc.			
	,	Firm/ Company			
	5741 SW 6th STREET				
		Address			
	MIAMI FL 33144				
		City/ State and Zip Coo	le		
flm	ıltiservices@yahoo.com				
	E-mail address: (to be u	sed for future annual repor	notification)		
For firther informati	on concerning this matter, plea	ea call·			
TO TOTAL	on convening and therest, bics	, , , , , , , , , , , , , , , , , , ,			
ENRIQUE R SANT	os	at (512-4074		
Name of Contact Person			ede & Daytime Telephone Number		
Englosed is a check f	or the following amount made	payable to the Florida Dep	artment of State:		
\$35 Filing Fee	□\$43.75 Filing Fee & Certificate of Status	Certified Copy (Additional copy is enclosed)	Certificate of Status Certified Copy (Additional Copy is enclosed)		
	dling Address		Address		
	rendment Section	Amendment Section			

Matting 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

06/17/2016 09:57 3056432035

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or "incorporated" or the abbreviation
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ster the name of the
. Florida
(Zip Code)

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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.

Example:

X Change	PT John I	<u>Doe</u>		
X Remove	V Mike	<u>Jones</u>		,
X Add	SV Salty	S <u>roith</u>		
Type of Action (Check One)	Title	Name .		Address
1) Change			•	
Add				
Remove	,			
2) Change				
Add		•		
Remove				
3)Change	-			
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Remove				
4) Change		•		
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Remove	•		٠.	
5) Change		•		
Add			•	
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Add			-	
Remove		•		

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The date of each amendment(s) as	loption:	, if other than th
date this document was signed.		
Effective date if applicable:		<u> </u>
	(no more than 90 days after amendment file date)	
Note: If the date inserted in this b document's effective date on the De	lock does not meet the applicable statutory filing requirements, this dapartment of State's records.	te will not be listed as th
Adoption of Amendment(s)	(CHECK ONE)	
The amendment(s) was/were add by the shareholders was/were su	pted by the shareholders. The number of votes cast for the amendment(s fficient for approval.	
☐ The amendment(s) was/were app must be separately provided for	roved by the shareholders through voting groups. The following stateme each voting group entitled to vote separately on the amendment(s):	ent
"The number of votes cast	for the amendment(s) was/were sufficient for approval	
· by	>9	
•	(voting group)	
The amendment(s) was/were add action was not required.	pted by the board of directors without shareholder action and shareholde	ा
The amendment(s) was/were add action was not required.	pted by the incorporators without shareholder action and shareholder	
06/15/2016 Dated		
Signature	migee R. Santa	
selected	rector, president or other officer — if directors or officers have not been it, by an incorporator — if in the hands of a receiver, trustee, or other coursed fiduciary by that fiduciary)	·
	ENRIQUE R SANTOS	
	(Typed or printed name of person signing)	
	PRESIDENT	
•	(Title of person signing)	