P10000102440

(Re	questor's Name)	
(Ad	dress)	
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(Ad	dress)	
(Cit	y/State/Zip/Phone	e #)
PICK-UP	☐ WAIT	MAIL.
(Bu	siness Entity Nan	ne)
(Do	cument Number)	
Certified Copies	_ Certificates	of Status
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COVER LETTER

TO: Amendment Section Division of Corporations

NAME OF CORPORATION: ABI DIS	STRIBUTOR CORPOR	RATION
DOCUMENT NUMBER: P1000010244	40	
The enclosed Articles of Amendment and fee	are submitted for filing.	
Please return all correspondence concerning t	his matter to the following:	
CHILLEDMO DIAZ	,	
GUILLERMO DIAZ	e of Contact Person	
MASTER ACCOUNTAN	ITS. PA	
· · · · · · · · · · · · · · · · · · ·	Firm/ Company	
3800 SW 121st AVE		
	Address	
MIAMI, FL 33175		
City/	State and Zip Code	
MASTERTAXEXP.	A@GMAIL.COM	
E-mail address: (to be u	sed for future annual report notification)	
For further information concerning this matte	r, please call:	
Ü	•	
GUILLERMO DIAZ	at (786) 683-4521	·
Name of Contact Person	Area Code & Daytime Tele	phone Number
Enclosed is a check for the following amount	made payable to the Florida Departi	nent 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	Street Address Amendment Section	
Division of Corporations	Division of Corporations	
P.O. Box 6327 Tallahassee, FL 32314	Clifton Building 2661 Executive Center Circle	
Tananassee, FL 32314	Tallahassee FI 32301	,

Articles of Amendment to Articles of Incorporation of

ABI DITRIBUTOR CORPORATION

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

P10000102440

(Document Number of Corporation (if known)

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
--

incorporated" or the abbreviation "Corp.,"	"Inc.," or Co.,	word "corporation," or the designation	"Corp," "Inc," or
o". A professional corporation name cociation," or the abbreviation "P.A."	e must contain	the word "chartere	ed," "professional
Enter new principal office address, if app incipal office address <u>MUST BE A STREE</u>			
Enter new mailing address, if applicable (Mailing address MAY BE A POST OFFICE)			
If amending the registered agent and/or r	egistered affice	address in Florida er	
new registered agent and/or the new regis			ter the name of the
<u>Name of New Registered Agent:</u>			ter the name of the
	stered office add		ter the name of the
Name of New Registered Agent:	stered office add	ress:	ter the name of the , Florida
Name of New Registered Agent:	(Floria	la street address) (City)	, Florida (Zip Code)

Page 1 of 4

If AMENDING the Officers and/or Directors, please list all officers/directors of the corporation as you now want the record to be. Please indicate the title(s), name and address for each officer/director.

(Our database can index up to 6 officers/directors. If you have more than 6 officers/directors, please list them on an additional sheet.)

Title(s)	<u>Name</u>		Address	
1) <u>P,D</u>	NELSON PRIMUS	6445	NW 122 AVE.	
		MIAN	/II FL 33183	
2)				
3)				
4)			<u></u>	
				
5)				
6)				
If REMOVING an eremoved:	officer and/or director, pleas	e list the title(s) a	nd name of the officer	director to be
Title(s)	<u>Name</u>	Title(s)	<u>Name</u>	
1) <u>P,D</u>	ISMAEL LONGO	4)		
2) <u>V,P</u>	JESUS L URIBE	5)		
3)		6)		

	(Be specific)
	·
(if not applicable, indicate N/A)	endment if not contained in the amendment itself:

The date of each amendment(s) ac	NOVEMBER 4th, 2011
	(date of adoption - required)
Effective date if applicable: (no	more than 90 days after amendment file date)
Adoption of Amendment(s)	(CHECK ONE)
The amendment(s) was/were add by the shareholders was/were su	opted by the shareholders. The number of votes cast for the amendment(s) fficient for approval.
	proved by the shareholders through voting groups. The following statement each voting group entitled to vote separately on the amendment(s):
"The number of votes cast f	or the amendment(s) was/were sufficient for approval
by	,,
(voti	ng group)
The amendment(s) was/were ado action was not required.	pted by the board of directors without shareholder action and shareholder
The amendment(s) was/were ado action was not required.	pted by the incorporators without shareholder action and shareholder
selected,	ctor, president or other officer – if directors or officers have not been by an incorporator – is in the hands of a receiver, trustee, or other court if fiduciary by that fiduciary)
<u>NE</u>	(Typed or printed name of person signing)
PI	RESIDENT
	(Title of person signing)