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.

(((H15000040460 3)))



Note: DO NOT hit the REFRESH/RELOAD button on your browser from this page. Doing so will generate another cover sheet.

To:

Division of Corporations

Fax Number

: (850)617-6380

From:

Account Name : JELEN ACCOUNTING SERVICES, INC

Account Number : 120120000052

Phone Fax Number : (305)591-9180 : (305)591-9167

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

COR AMND/RESTATE/CORRECT OR O/D RESIGN

Estimated Charge

Certificate of Status Certified Copy Page Count 05

CORELITE, INC

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Corporate Filing Menu

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SECRETARY OF CHARLE

Articles of Amendment to Articles of Incorporation of

15 FEB 18 AM 10: 06

CORELITE, INC.
(Name of Corporation as currently filed with the Florida Dept. of State) P1100001548
(Document Number of Corporation (if known)
Pursuant to the provisions of section 607.1006, Florida Statutes, this <i>Florida Profit Corporation</i> adopts the following amendment(s) its Articles of Incorporation:
A. If amending name, enter the new name of the corporation:
name must be distinguishable and contain the word "corporation," "company," or "invorporated" 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
(Florida street address)
New Registered Office Address: , Florida (City) (Zip Code)
(City) (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.
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)

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 Doc 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	PT	John Doe				
X Romove	¥	Mike Jones				
X Add	<u>\$V</u>	Sally Smith				
Type of Action (Check One)	Title	Name	<u>Addres</u> s			
I) Change	T	DOMENICA DEL CIOPPO	1060 E 30 STREET			
Add			HIALEAH, FL. 33013			
Remove	•					
2) Change	VP	MARIELLA VASQUEZ	1060 E 30 STREET			
Add			HIALEAH, FL. 33013			
Remove						
3) Change	S	GIANCARLO DEL CIOPPO	1060 E 30 STREET			
Add			HIALEAH, FL. 33013			
Remove						
4) Change						
Add		The state of the s	***************************************			
Remove						
5) Change						
Add						
Remove						
6) Change						
Add						
Remove						

- If amending or adding additional Articles, enter change(s) here:  (stach additional sheets, if necessary). (Be specific)						
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The date of each amendment(s):	odention: 02/11/2015	SECRETARY OF COR	PORATIONS
date this document was signed.		15 FEB 18	414 10: 06
Effective date if applicable: U.	2/11/2015 (no more than 90 days after amen		<del></del> .
	the more than 90 auts after amen	ament jue valej	
Adoption of Amendment(s)	(CHECK ONE)		
The amendment(s) was/were was/were sufficient for appro	adopted by the members and the number c	f votes east for the amendme.	nt(s)
There are no members or men adopted by the board of-direct	nbers entitled to vote on the amendment(s	). The amendment(s) was/we	re
Dated 02/1	1/2015		
Signature	James Jum		
have not b	irman or vice chidman of the board, president seen selected, by an incorporator — if in the tappointed fiduciary by that fiduciary)	dent or other officer-if direct hands of a receiver, trustee.	ors or
PASCU	AL DEL CIOPPO		
PRESID	(Typed or printed name of person signiful ENT	g)	

(Title of person signing)

February 18, 2015

FLORIDA DEPARTMENT OF STATE
Division of Corporations

CORELITE, INC 1000 EAST 30TH STREET HIALEAH, FL 33013

SUBJECT: CORRLITE, INC REF: P11000001546

We received your electronically transmitted document. However, the document has not been filed. Please make the following corrections and refax the complete document, including the electronic filing cover sheet.

The document you submitted has been prepared pursuant to nonprofit statutes (chapter 617, Florida Statutes). As the entity was originally filed as a corporation for profit, this document should be filed pursuant to chapter 607, Florida Statutes.

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

Carolyn Lewis Regulatory Specialist II FAX Aud. #: H15000040460 Letter Number: 615A00003378

