

06/22/2011 18:08 9543883850

Division of Corporations

TAX

00089 P.002/006

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**P110000003503**

Florida Department of State  
Division of Corporations  
Electronic Filing Cover Sheet

**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.**

((H11000162883 3)))



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To:

Division of Corporations  
Fax Number : (850) 617-6380

From:

Account Name : BROWARD SOHO SERVICES INC.  
Account Number : 120100000080  
Phone : (954) 709-0380  
Fax Number : (954) 960-5630

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

Email Address: \_\_\_\_\_

**COR AMND/RESTATE/CORRECT OR O/D RESIGN  
SWEETIES & CANDIES FB, CORP**

Certificate of Status	0
Certified Copy	0
Page Count	01
Estimated Charge	\$35.00

**FILED**  
2011 JUN 23 AM 10:17  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

Electronic Filing Menu

Corporate Filing Menu

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*TBrown 6/23/11*

**COVER LETTER**

TO: Amendment Section  
Division of Corporations

NAME OF CORPORATION: SWEETIES & CANDIES FB, CORP

DOCUMENT NUMBER: P11000003503

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

Please return all correspondence concerning this matter to the following:

AGUSTIN ORTIZ

Name of Contact Person

SWEETIES & CANDIES FB, CORP

Firm/ Company

9999 NW 89 AVE BAY 13

Address

MEDLEY, FL 33178

City/ State and Zip Code

TAXRIGHT7@YAHOO.COM

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

For further information concerning this matter, please call:

AGUSTIN ORTIZ

Name of Contact Person

at ( 305 )

779-2822

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

06/22/2011 18:08 9543683850  
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TAX

#0089 P.001/006

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June 22, 2011

FLORIDA DEPARTMENT OF STATE  
Division of Corporations

SWEETIES & CANDIES FB, CORP  
9999 NW 89 AVE BAY 1 #24  
MEDLEY, FL 33178US

SUBJECT: SWEETIES & CANDIES FB, CORP  
REF: P11000003503

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

Please change the title of the officer signing the amendment to secretary because he is not the incorporator.

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) 245-6925.

Teresa Brown  
Regulatory Specialist II

FAX Aud. #: H11000162883  
Letter Number: 711A00015190

RECEIVED

11 JUN 23 AM 8:00

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

P.O BOX 6327 - Tallahassee, Florida 32314

Articles of Amendment  
to  
Articles of Incorporation  
of

**SWEETIES & CANDIES FB, CORP**

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

**P11000003503**

(Document Number of Corporation (if known))

FILED  
2011 JUN 23 AM 10:17  
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**)

9999 NW 89 AVE BAY 13

MEDLEY, FL 33178

**C. Enter new mailing address, if applicable:**  
(Mailing address **MAY BE A POST OFFICE BOX**)

9999 NW 89 AVE BAY 13

MEDLEY, FL 33178

**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:

AGUSTIN ORTIZ

New Registered Office Address:

9999 NW 89 AVE BAY 13

(Florida street address)

MEDLEY

(City)

Florida 33178

(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)*

<u>Title</u>	<u>Name</u>	<u>Address</u>	<u>Type of Action</u>
DS	AGUSTIN ORTIZ	721 SE 8TH PLACE HIALEAH, FL 33010	<input checked="" type="checkbox"/> Add <input type="checkbox"/> Remove
			<input 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)*

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**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)*

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The date of each amendment(s) adoption: 06/20/2011

(date of adoption is required)

Effective date if applicable: 06/20/2011

(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 06/20/2011

Signature \_\_\_\_\_

(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)

AGUSTIN ORTIZ

(Typed or printed name of person signing)

SECRETARY

(Title of person signing)