

**P110000018245**

Florida Department of State  
Division of Corporations  
Electronic Filing Cover Sheet

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To:

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

From:

Account Name : ACCOUNTANT & MANAGEMENT INC  
Account Number : I20110000070  
Phone : (305) 541-3980  
Fax Number : (305) 541-7033

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

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**COR AMND/RESTATE/CORRECT OR O/D RESIGN  
INTERCOM ACCESSORIES CORP**

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

*Amens*

10/26/2011 12:46 FAX

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050-617-6361

10/26/2011 3:24:23 PM PAGE 1/001 Fax Server



October 26, 2011

FLORIDA DEPARTMENT OF STATE  
Division of Corporations

INTERCOM ACCESSORIES CORP  
6741 SW 24TH ST  
SUITE # 13  
MIAMI, FL 33155US

SUBJECT: INTERCOM ACCESSORIES CORP  
REF: P11000018245

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 date of adoption of each amendment must be included in the document.

The document submitted does not meet legibility requirements for electronic filing. Please do not attempt to refax this document until the quality has been improved.

The FEI# is not readable. Please show type of action for Jesus Vigoa Media & Sandra L. Rodriguez adding or removing.

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) 245-6892.

Tina Roberts  
Regulatory Specialist II

FAX Aud. #: H11000257173  
Letter Number: 511A00024506

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11 OCT 31 AM 8:03

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TALLAHASSEE, FLORIDA

P.O BOX 6327 - Tallahassee, Florida 32314

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**COVER LETTER**

**TO:** Amendment Section  
Division of Corporations

**NAME OF CORPORATION:** INTERCOM ACCESSORIES CORP

**DOCUMENT NUMBER:** P11000018245

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

Please return all correspondence concerning this matter to the following:

MOSES NAE

Name of Contact Person

ACCOUNTANT & MANAGEMENT

Firm/ Company

1549 NE 123RD ST

Address

NORTH MIAMI, FL 33161

City/ State and Zip Code

INFO@SOLUTIONSBYACCOUNTANTS.COM

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

For further information concerning this matter, please call:

MOSES NAE

Name of Contact Person

at ( 305 ) 541-3980

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

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Articles of Amendment  
to  
Articles of Incorporation  
of

INTERCOM ACCESSORIES CORP(Name of Corporation as currently filed with the Florida Dept. of State)P11000018245(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:**

*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)**

464 WEST 29TH STHIALEAH, FL 33010

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

464 WEST 29TH STHIALEAH, FL 33010

**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:

464 WEST 29TH ST

New Registered Office Address:

(Florida street address)

HIALEAH

(City)

Florida 33010

(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

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**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.)

<u>Title(s)</u>	<u>Name</u>	<u>Address</u>
ADD 1) PD	VIGOA MEDINA, JESUS	464 WEST 29TH ST HIALEAH, FL 33010
ADD 2) VP	RODRIGUEZ, SANDRA L	464 WEST 29TH ST HIALEAH, FL 33010
3) _____	_____	_____
4) _____	_____	_____
5) _____	_____	_____
6) _____	_____	_____

**If REMOVING an officer and/or director, please list the title(s) and name of the officer/director to be removed:**

<u>Title(s)</u>	<u>Name</u>	<u>Title(s)</u>	<u>Name</u>
1) _____	_____	4) _____	_____
2) _____	_____	5) _____	_____
3) _____	_____	6) _____	_____

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(attach additional sheets, if necessary). (Be specific)

PLEASE CHANGE THE FEI/EIN NUMBER FROM "NONE" TO ~~275096318~~

FEIN: 275096318

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: 10/26/11

Effective date if applicable: OCTOBER 26, 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 10/26/11

Signature [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)

JESUS VIGOA MEDINA  
(Typed or printed name of person signing)

PRESIDENT  
(Title of person signing)

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