

PII0000018437

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

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05/16/11--01007--021 **35.00

FILED
11 JUN - 6 PM 1:43
SECRETARY OF STATE
MICHIGAN DEPT OF TREASURY

Amend.
6/7/11
DC



FLORIDA DEPARTMENT OF STATE
Division of Corporations

May 26, 2011

ANDRE KATTOURA
1287 EAST NEWPORT CENTER DR.
SUITE 201
DEERFIELD BEACH, FL 33442

SUBJECT: CONSUMER DOCUMENT SERVICES, INC.
Ref. Number: P11000018437

We have received your document and check(s) totaling \$35.00. However, the enclosed document has not been filed and is being returned to you for the following reason(s):

Please check the appropriate box on the amendment form regarding the adoption of the amendment(s).

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) 245-6906.

Darlene Connell
Regulatory Specialist II

Letter Number: 611A00013030

COVER LETTER

TO: Amendment Section
Division of Corporations

NAME OF CORPORATION: CONSUMER DOCUMENT SERVICES, INC.

DOCUMENT NUMBER: P11000018437

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

Please return all correspondence concerning this matter to the following:

ANDRE KATTOURA

Name of Contact Person

Firm/ Company

1287 E NEWPORT CENTER DR STE 201

Address

DEERFIELD BEACH, FL 33442

City/ State and Zip Code

kattoura.accounting@gmail.com

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

For further information concerning this matter, please call:

ANDRE KATTOURA

Name of Contact Person

at (954)

427-8040

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

Articles of Amendment
to
Articles of Incorporation
of

CONSUMER DOCUMENT SERVICES, INC.

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

P11000018437

(Document Number of Corporation (if known))

FILED
14 JUN - 6 PM 1:33
OFFICE OF THE CLERK
STATE OF 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:

N/A

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)

1489 W PALMETO PK RD

STE 494

BOCA RATON, FL 33486

C. Enter new mailing address, if applicable:

(Mailing address MAY BE A POST OFFICE BOX)

1489 W PALMETTO PALMETTO PK RD

STE 494

BOCA RATON, FL 33486

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:

SNOW SEBEASTIAN

New Registered Office Address:

1489 W PALMETTO PK RD STE 494

(Florida street address)

BOCA RATON

(City)

Florida 33486

(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.

Snow Sebastian

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>
P	MARIA ISTURIZ	1287 E NEWPORT CENTER DR STE 201 DEERFIELD BEACH, FL 33442	<input type="checkbox"/> Add <input checked="" 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)

ADD: EIN 27-5125474

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)

N/A

The date of each amendment(s) adoption: 05/11/2011

(date of adoption is required)

Effective date if applicable: 05/11/2011

(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 05/11/2011

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)

MARIA ISTURIZ

(Typed or printed name of person signing)

PRESIDENT

(Title of person signing)