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COVER LETTER

No. 0639 P. 2/5

TO: Amendment Section ... Division of Corporations NAME OF CORPORATION: Premium Petrol Services Corporation P11000062366 DOCUMENT NUMBER: ___ The enclosed Articles of Amendment and fee are submitted for filing. Please return all correspondence concerning this matter to the following: Kerriann Bucknor Name of Contact Person CrichtonMullings & Associates P.A. Firm/ Company 3350 SW 148th Ave. Address Miramar, FL 33027 City/ State and Zip Code admin-us@crichtonmullings.com E-mail address: (to be used for future annual report notification) For further information concerning this matter, please call: at (954) 862-2250

Area Code & Daytime Telephone Number Kerriann Name of Contact Person Enclosed is a check for the following amount made payable to the Florida Department of State: ☐ \$43.75 Filing Fee & \$\square\$ \$43.75 Filing Fee & □ \$52.50 Filing Fee Certificate of Status Certified Copy Certificate of Status (Additional copy is enclosed) Certified Copy (Additional Copy is enclosed) Mailing Address Street Address Amendment Section Amendment Section Division of Corporations Division of Corporations P.O. Box 6327 Clifton Building Tallahassee, FL 32314 2661 Executive Center Circle Tallahassee, FL 32301

<i>,</i>			
Oct. 17. 2011 12:49PM		Articles of Amendment	No. 0639" P. 3/5"
		to	FILED
***	A.	rticles of Incorporation of	1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1
· · Pr	emium Petrol		2011 OCT 17 PH 3 13
(Name of Cor	poration as curre	atly filed with the Florida De	ept. of Stately 0 A U.S. STALL
		000062366	TALLAHASSEE FLORID
	(Document Numi	per of Corporation (if known)	
amendment(s) to its Articles of	of Incorporation:		la Profit Corporation adopts the following
A. If amending name, enter	the new name of	the corporation:	
			The new
	" or Co.," or the a	designation "Corp," "Inc," o	mpany," or "incorporated" or the or "Co". A professional corporation abbreviation "P.A."
B. Enter new principal office	o address (fanni	lanhlar	
(Principal office address MU			
C. Entermone multiperaddy	ifammliaahla.		
C. Enter new mailing addr (Mailing address MAY B		<u>E BOX</u>)	
D 76 31 - 4b 5-4	- 3		
D. If amending the register new registered agent and			orida, enter the name of the
Name of New Registe	<u>rea Ageni</u> :		
			-
New Registered Office	: Address:	(Florida street addre	ess)
	_		, Florida
		(City)	(Zip Code)
New Registered Agent's Sig	nature, if changin	g Registered Agent:	
I hereby accept the appointme	ent as registered ag	gent. I am familiar with and a	accept the obligations of the position.
	Si	gnature of New Registered Ag	ent, if changing

Page 1 of 3

анист ини	itional sheets, if necessary)	enter the title and name of each offic ch Officer and/or Director being add	
<u>itle</u>	<u>Name</u>	Address	Type of Action
<u>D</u> ′	Adrian Baugh	3350 SW 148th Ave. Suite 203 Miramar FL 33027	
			_
		·	
		ange, reclassification, or cancellation	
provisi	ons for implementing the amend not applicable, indicate N/A)	dment if not contained in the amends	tent usan:
provisi		dment if not contained in the amends	item risen.
provisi		dment if not contained in the amendr	neut risert.

2

γ		
ct. 17. 2011 12:49PM	dention: August 30.2011	No. 0639
•	September 1, 2011	
	more than 90 days after amendment file date,	
r •	1	
Adoption of Amendment(s)	(CHECK ONE)	
The amendment(s) was/were ad by the shareholders was/were at	opted by the shareholders. The number of vo officient for approval.	tes cast for the amendment(s)
The amendment(s) was/were ap must be separately provided for	proved by the shareholders through voting green each voting group antitled to vote separately	sups. The following statement on the amendment(s):
"The number of votes cast	for the amendment(s) was/were sufficient for	approv al
by	ing group)	
(vot	(ng group)	
action was not required.	opted by the board of directors without shareh	
The amendment(s) was/were ad action was not required.	opted by the incorporators without shareholde	r action and shareholder
Dated August 3	30, 2011	
Signature	736	
(By a di selected	rector, president or other officer—If directors by an incorporator—if in the hands of a recei- d fidneigry by that fiduciary)	
	Brijkumar Nankani	
	(Typed or printed name of person sig	ning)
	Director	
	(Title of person signing)	

Page 3 of 3

P. 5/5