

P11000008 9784

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐

PICK-UP

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MAIL

(Business Entity Name)

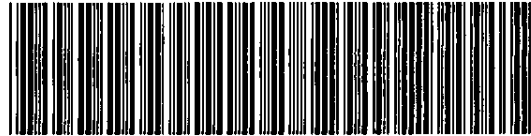
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FILED
11 DEC 15 PM 12:28
SECRETARY OF STATE
TALLAHASSEE FLORIDA

Da 731511



FLORIDA DEPARTMENT OF STATE
Division of Corporations

December 2, 2011

FRITZ MCKENZIE
NEW HORIZON INCOME TAX FIRM INC
15665 MIAMI LAKEWAY N STE 201
MIAMI LAKES, FL 33014

SUBJECT: NEW HORIZON INCOME TAX FIRM INC
Ref. Number: P11000089784

We have received your document for NEW HORIZON INCOME TAX FIRM INC and your check(s) totaling \$35.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

Articles of Correction must be filed within 30 days of the file date of the document that is being corrected. As the time period for filing Articles of Correction has expired, an amendment to the articles of incorporation could be filed at this time.

We are enclosing the proper form(s) with instructions for your convenience.

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

Letter Number: 111A00027055

RECEIVED

11 DEC 15 AM 10:17

DIVISION OF CORPORATIONS
TALLAHASSEE, FLORIDA

COVER LETTER

TO: Amendment Section
Division of Corporations

NAME OF CORPORATION: NEW HORIZON INCOME TAX FIRM INC

DOCUMENT NUMBER: PJ1000089784

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

Please return all correspondence concerning this matter to the following:

FRITZ MCKENZIE

Name of Contact Person

NEW HORIZON INCOME TAX FIRM INC

Firm/ Company

15665 MIAMI LAKEWAY N STE 201

Address

MIAMI LAKES FL 33014

City/ State and Zip Code

NEWHORIZONINCOMETAXFIRM@HOTMAIL.COM

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

For further information concerning this matter, please call:

FRITZ MCKENZIE

Name of Contact Person

at (786) 356-0144

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

FILED

11 DEC 15 PM 12:28

SECRETARY OF STATE
TALLAHASSEE FLORIDA

NEW HORIZON INCOME TAX FIRM INC

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

P11000089784

(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**)

160 NW 176 STREET

MIAMI GARDENS FL 33169

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

160 NW 176 STREET

MIAMI GARDENS FL 33169

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)

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, 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>
1) D	LOUISE SENATUS	160 NW 176TH STREET MIAMI GARDENS FL 33169
2) VP	FRITZ MCKENZIE	160 NW 176TH STREET MIAMI GARDENS FL 33169
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) P	Fritz Albert McKenzie		
2)		5)	
3)		6)	

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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)

The date of each amendment(s) adoption: _____

12-12-11

Effective date if applicable: _____

(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

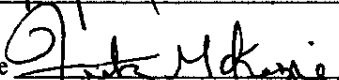
by _____."
(voting group)

- ☒ 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

12/12/11

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)

FRITZ MCKENZIE

(Typed or printed name of person signing)

VICE PRESIDENT

(Title of person signing)