

P11000104120

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

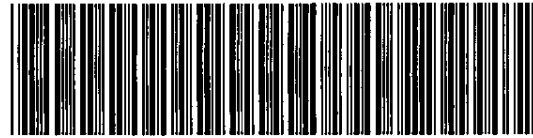
(Business Entity Name)

(Document Number)

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12 FEB 20 PM 2:12  
SECRETARY OF STATE  
TALLAHASSEE FLORIDA

FEB 20 2012  
T. ROBERTS



FLORIDA DEPARTMENT OF STATE  
Division of Corporations

February 9, 2012

SANDRA PEREZ  
PBA PROFESSIONAL SERVICES INC  
174 NE 96 ST  
MIAMI, FL 33138

SUBJECT: DIRECT HOSPITALITY MANUFACTURERSI NC  
Ref. Number: P11000104120

We have received your document for DIRECT HOSPITALITY MANUFACTURERSI NC and your check(s) totaling \$35.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

The current name of the entity is as referenced above. Please correct your document accordingly.

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) 245-6050.

Tina Roberts  
Regulatory Specialist II

Letter Number: 212A00005903

RECEIVED

12 FEB 20 AM 8:23

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

**COVER LETTER**

TO: Amendment Section  
Division of Corporations

NAME OF CORPORATION: DIRECT HOSPITALITY MANUFACTURER INC  
DOCUMENT NUMBER: P11000104120

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

Please return all correspondence concerning this matter to the following:

SANDRA PEREZ

Name of Contact Person

PBA PROFESSIONAL SERVICES INC

Firm/ Company

174 NE 96 ST

Address

MIAMI, FL 33138

City/ State and Zip Code

SANDRA@WEBPBA.COM

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

For further information concerning this matter, please call:

SANDRA PEREZ at ( 305 ) 758-1136  
Name of Contact Person 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  
enclosed)

☐ \$43.75 Filing Fee &  
Certified Copy  
(Additional copy is  
(Additional Copy

☐ \$52.50 Filing Fee  
Certificate of Status  
Certified 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

DIRECT HOSPITALITY MANUFACTURERS INC

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

P11000104120

(Document Number of Corporation (if known))

FILED  
12 FEB 20 PM 2:12  
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:

Direct Hospitality Manufacturers Inc 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)

C. Enter new mailing address, if applicable:

(Mailing address MAY BE A POST OFFICE BOX)

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, 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)*

*Please note the officer/director title by the first letter of the office title:*

*P = President; V= Vice President; T= Treasurer; S= Secretary; D= Director; TR= Trustee; C = Chairman or Clerk; CEO = Chief Executive Officer; CFO = Chief Financial Officer. If an officer/director holds more than one title, list the first letter of each office held. President, Treasurer, Director would be PTD.*

*Changes should be noted in the following manner. Currently John Doe is listed as the PST and Mike Jones is listed as the V. There is a change, Mike Jones leaves the corporation, Sally Smith is named the V and S. These should be noted as John Doe, PT as a Change, Mike Jones, V as Remove, and Sally Smith, SV as an Add.*

Example:

<u>X</u> Change	<u>PT</u>	<u>John Doe</u>
<u>X</u> Remove	<u>V</u>	<u>Mike Jones</u>
<u>X</u> Add	<u>SV</u>	<u>Sally Smith</u>

<u>Type of Action</u> (Check One)	<u>Title</u>	<u>Name</u>	<u>Address</u>
1) <u>    </u> Change <u>    </u> Add <u>X</u> Remove	<u>P</u>	<u>YOHANNY NOESI</u>	<u>767 NE 79TH ST</u> <u>MIAMI, FL 33138</u>
2) <u>    </u> Change <u>X</u> Add <u>    </u> Remove	<u>P</u>	<u>VINCENT HERNANDEZ</u>	<u>767 NE 79TH ST</u> <u>MIAMI, FL 33138</u>
3) <u>    </u> Change <u>    </u> Add <u>    </u> Remove	<u>    </u>	<u>                                </u>	<u>                                </u> <u>                                </u> <u>                                </u>
4) <u>    </u> Change <u>    </u> Add <u>    </u> Remove	<u>    </u>	<u>                                </u>	<u>                                </u> <u>                                </u> <u>                                </u>
5) <u>    </u> Change <u>    </u> Add <u>    </u> Remove	<u>    </u>	<u>                                </u>	<u>                                </u> <u>                                </u> <u>                                </u>
6) <u>    </u> Change <u>    </u> Add <u>    </u> Remove	<u>    </u>	<u>                                </u>	<u>                                </u> <u>                                </u> <u>                                </u>

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[illegible]

The date of each amendment(s) adoption: 01/26/2012

Effective date if applicable: 01/26/2012

(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

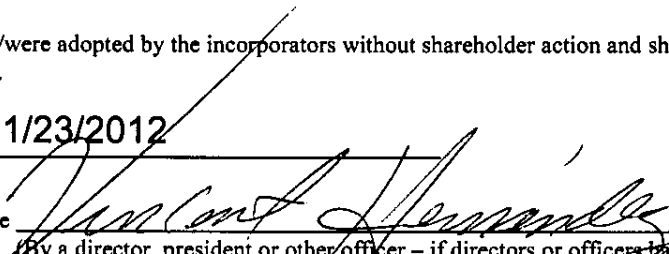
by \_\_\_\_\_."  
(voting group)

☒ 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 01/23/2012

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)

VICENTE HERNANDEZ

(Typed or printed name of person signing)

PRESIDENT

(Title of person signing)