P12000005062

(Re	equestor's Name)			
(A d	Idress)			
(Ad	Idress)			
(Ci	ty/State/Zip/Phone	e #)		
, PICK-UP	WAIT	MAIL		
(Business Entity Name)				
(Do	ocument Number)			
Certified Copies	_ Certificates	of Status		
Special Instructions to	Filing Officer:			





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November 3, 2014

DULCE M. FERNANDEZ / TAX AND IMMIGRATION SOLUTIONS INC 1140 WEST 50 ST SUITE 314 HIALEAH, FL 33012 US

SUBJECT: GABAR INVESTMENT CORP

Ref. Number: P12000005062

We have received your document for GABAR INVESTMENT CORP and your check(s) totaling \$43.75. However, the enclosed document has not been filed and is being returned for the following correction(s):

The document you submitted has been prepared pursuant to nonprofit statutes (chapter 617, Florida Statutes). As the entity was originally filed as a corporation for profit, this document should be filed pursuant to chapter 607, Florida Statutes.

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

If you have any questions concerning the filing of your document, please call (850) 245-6050.

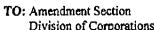
Letter Number: 014A00023447

Carolyn Lewis Regulatory Specialist II

www.sunbiz.org

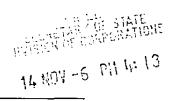
DO DOMAGOE MILL

COVER LETTER



Division of Corporations				
NAME OF CORPORATION: _	Gabar Ir	nvestment	Corp	
DOCUMENT NUMBER:	P12000	005062		
The enclosed Articles of Amendm	ent and fee are sub	mitted for filing.		
Please return all correspondence c	oncerning this matte	er to the following:		
Dulce N	∕l Fernan	dez		
		(Name of Contact Pers	son)	
Tax and	d Immigra	ation soluti	ons Inc	
		(Firm/ Company)		
1140 \	West 50	St Ste 314		
		(Address)		
Hialea	ih, FL 3	3012		
		(City/ State and Zip Co	ode)	
		hoo.com		
	·	for future annual repor	t notification)	
For further information concerning	, this matter, please	call:		
Dulce m Fernar	ndez	_{at} 305	747-2106 Code & Daytime Telephone Nu	
(Name of Contact I	Person)	(Area	Code & Daytime Telephone Nu	mber)
Enclosed is a check for the followi	ng amount made pa	yable to the Florida De	partment of State:	,
5: 22 3: 25 3: 25	13.75 Filing Fee & extificate 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 Corp P.O. Box 6327 Tallabassee, FL	tion orations	Ame Divis Clifto 2661	et Address Indiment Section Indicate the Corporations In Building Executive Center Circle Indicate the Circle Indicate the Circle	

Articles of Amendment to Articles of Incorporation of



Gabar Investment Corp

(Name of Corporation as	currently filed with the Fl	orida Dept. of State)	
P 12000005062			
(Docume	nt Number of Corporation (it	known)	•
Pursuant to the provisions of section 607 its Articles of Incorporation:	.1006, Florida Statutes, this I	Florida Profit Corporation adopts the following a	mendment(s) to
A. If amending name, enter the new n	ame of the corporation:		
			he new
name must be distinguishable and con "Corp.," "Inc.," or Co.," or the design word "chartered," "professional associc	nation "Corp," "Inc," or "(n," "company," or "incorporated" or the abbi Co". A professional corporation name must cor P.A."	reviation rtain the
-		7432 WEST 29 TH WAY	
B. Enter new principal office address, if applicable: (Principal office address MUST BE A STREET ADDRESS)		HIALEAH,FL 33018	
C. Enter new mailing address, if applicable: (Mailing address <u>MAY RE A POST OFFICE BOX</u>)		7432 WEST 29 TH WAY	
		HIALEAH, FL33018	
D. If amending the registered agent an			
new registered agent and/or the ne-			
Name of New Registered Agent	Dulce M Fernance		
	1140 west 50 st		
New Registered Office Address:	(Florida stre	es address) Florida 33012	
New Nextstered Villes Address.	(City)	(Zip Code)	
New Registered Agent's Signature I hereby accept the appointment as i	, if changing Registered	Agent: niliar with and accept the obligations of the p	oosition.
	DHW		
	Signature of New .	Ragistered 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:	1	_	
X Change X Remove		n Doe te Jones	
X Add		y Smith	
Type of Action (Check One)	<u>Title</u>	Name	<u>Address</u>
1) X Change	<u>P</u>	Flores Gabriella	871 Ballart St Ste L
Add			ALTAMONTE SPRINGS
X Remove			FL 32701
2) Change	P	Couccett Arsenio	7432 West 29 TH Way
X			Hialeah , FL 33018
Remove			
3) Change			
Add			
Remove			
4) Change			The second of th
Add		•	
Remove			
5) Change	<u></u>		
Add			
Remove			
ර) Change			
Add			
Remove			
Kemove			

(attach additional sheets, if necessary).	(Be specific)				•	
Remove the old president						
Add new President						
			·			
	· .				<u> </u>	
				····		
	-				<u>. </u>	
·				<u> </u>		
						
				•		
			,	•		
	····					

E. If amending or adding additional Articles, enter change(s) here:

The	date of each amendment	(s) adoption: 09/30/2014		, if other than the
	this document was signed		SECRETARY SECRETARY SIVISION OF CO	or SIATE
Eff	ective date <u>if applicable</u> :	09/30/2014	SECHETART SECHETAR CO	REPORATIONS
		(no more than 90 days after ame	ndment file date) 11VISICH -6	PH 14: 13
Ade	option of Amendment(s)	(CHECK ONE)		
	The amendment(s) was/w was/were sufficient for ap	ere adopted by the members and the number opposal.	of votes cast for the amendment(s)	
	There are no members or adopted by the board of o	members entitled to vote on the amendment(sirectors.). The amendment(s) was/were	
	Dated 09/	30/2014		
	Signature 🕕	I A A SA		
	(B) the	shauman of yes chairman of the board, pres t been selected, by an incorporator – if in the ourt appointed fiduciary by that fiduciary)		
	Aı	senio Couccet		
	· · · · · · · · · · · · · · · · · · ·	(Typed or printed name of person signif	ag)	
	P	resident		
		(Title of person signing)		