

PI 300000000074

(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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500250229845

Amend

07/31/13--01006--003 **35.00

FILED
2013 AUG 28 PM 2:09
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

*00789, 00563, 00671

DR
8/28/13

COVER LETTER

TO: Amendment Section
Division of Corporations

NAME OF CORPORATION: Juntura Group, Inc.

DOCUMENT NUMBER: P13000000074

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

Please return all correspondence concerning this matter to the following:

Carlos Anthony Capiro

Name of Contact Person

Juntura Group, Inc.

Firm/ Company

4521 Oxen Hill Loop

Address

Oviedo, FL 32765

City/ State and Zip Code

carlos@junturagroup.com

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

For further information concerning this matter, please call:

Carlos Anthony Capiro

Name of Contact Person

at (407)

310-3422

Area Code & Daytime Telephone Number

Enclosed is a check for the following amount made payable to the Florida Department of State:

- | | | | |
|---|--|---|--|
| <input checked="" type="checkbox"/> \$35 Filing Fee | <input type="checkbox"/> \$43.75 Filing Fee &
Certificate of Status | <input type="checkbox"/> \$43.75 Filing Fee &
Certified Copy
(Additional copy is
enclosed) | <input type="checkbox"/> \$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



FLORIDA DEPARTMENT OF STATE
Division of Corporations

August 5, 2013

Carlos Anthony Capiro
Juntura Group, Inc.
4521 Oxen Hill Loop
Oviedo, FL 32765

SUBJECT: JUNTURA GROUP INC
Ref. Number: P13000000074

We have received your document for JUNTURA GROUP 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):

The date of adoption of each amendment must be included in the document.

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.

Annette Ramsey
Regulatory Specialist II

Letter Number: 013A00018702

RECEIVED
13 AUG 28 PM 12:35
DIVISION OF CORPORATIONS
TALLAHASSEE, FLORIDA

Articles of Amendment
to
Articles of Incorporation
of

FILED

Juntura Group, Inc.

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

2013 AUG 28 PM 2: 09

P13000000074

(Document Number of Corporation (if known))

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:

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**)

4521 Oxen Hill Loop
Oviedo, FL 32765

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

4521 Oxen Hill Loop
Oviedo, FL 32765

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 Carlos Anthony Capiro
4521 Oxen Hill Loop
(Florida street address)

New Registered Office Address: Oviedo, Florida 32765
(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:

☒ Change PT John Doe

☒ Remove V Mike Jones

☒ Add SV Sally Smith

Type of Action (Check One)	Title	Name	Address
1) <input type="checkbox"/> Change <input type="checkbox"/> Add <input checked="" type="checkbox"/> Remove	<u>P</u>	<u>Jason R. Goldberg</u>	<u>5326 Tattinger Lane</u> <u>Oviedo, FL 32765</u>
2) <input checked="" type="checkbox"/> Change <input type="checkbox"/> Add <input type="checkbox"/> Remove	<u>CEO</u>	<u>Carlos Anthony Capiro</u>	<u>4521 Oxen Hill Loop</u> <u>Oviedo, FL 32765</u>
3) <input type="checkbox"/> Change <input type="checkbox"/> Add <input checked="" type="checkbox"/> Remove	<u>VP</u>	<u>Sergie A. Albino</u>	<u>451 Victor Ave.</u> <u>Longwood, FL 32750</u>
4) <input checked="" type="checkbox"/> Change <input type="checkbox"/> Add <input type="checkbox"/> Remove	<u>P</u>	<u>Steven E. Madow</u>	<u>495 Bennett Rd</u> <u>#101</u> <u>Orlando, FL 32814</u>
5) <input type="checkbox"/> Change <input type="checkbox"/> Add <input type="checkbox"/> Remove	<u> </u>	<u> </u>	<u> </u> <u> </u> <u> </u>
6) <input type="checkbox"/> Change <input type="checkbox"/> Add <input type="checkbox"/> Remove	<u> </u>	<u> </u>	<u> </u> <u> </u> <u> </u>

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

(Attach additional sheets, if necessary). (Be specific)

N/A

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: ~~5/20/13~~ 5/20/13

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 7/28/13

Signature Carlos Anthony Capiro
(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)

CARLOS ANTHONY CAPIRO
(Typed or printed name of person signing)

DIRECTOR
(Title of person signing)

8/28/13

CORPORATE DETAIL RECORD SCREEN

10:13 AM

NUM: P12000001616 ST:FL ACTIVE/FL PROFIT

FLD: 01/05/2012 EFF: 01/02/2012

NAME : IDENTACORP, INCORPORATED

PRINCIPAL: 2954 NW 99TH COURT

ADDRESS DORAL, FL 33172 US

RA NAME : HOUTENBRINK, PAUL R

RA ADDR : 2954 NW 99TH COURT

DORAL, FL 33172 US

ANN REP : * NONE FILED *

*Change
Email*

1. MENU, 3. OFFICERS, 7. LIST, 8. NEXT, 9. PREV

ENTER SELECTION AND CR: