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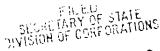
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## **COVER LETTER**

**TO:** Amendment Section Division of Corporations

NAME OF CORPO	RATION: A&L GOOD	S DELIVERIES (	OF FLORIDA, INC		
DOCUMENT NUMBER: P13000038896					
The enclosed Articles	of Amendment and fee are su	bmitted for filing.			
Please return all corre	spondence concerning this ma	tter to the following:			
	BIBIANA M ESPI	NOSA			
		Name of Contact Person	1		
	J&B ACCOUNTIN	NG AND OTHER	RS, INC		
		Firm/ Company	1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1		
	3611 SW 87TH A	VE STE. 105			
		Address			
	MIAMI, FLORIDA	33165			
		City/ State and Zip Cod	e		
JO	HNESPINOSA@H	HOTMAIL.COM			
	E-mail address: (to be us	ed for future annual report	notification)		
For further informatio	п concerning this matter, pleas	e call:			
LAZARO RAMOS		_at (_786	873-1110 de & Daytime Telephone Number		
Name of Contact Person		Area Co	de & 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		Street Address			
	endment Section ision of Corporations	Amendment Section Division of Corporations			
P.O. Box 6327 Clifton Building			Building		
Tallahassee, FL 32314 2661 Executive Center Circle Tallahassee, FL 32301					

## Articles of Amendment to Articles of Incorporation of



1, UNV 12 PM

## A&L GOODS DELIVERIES OF FLORIDA, INC

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

P13000038896			
(Document Number of Corporation (	if known)		
Pursuant to the provisions of section 607.1006, Florida Statutes, this its Articles of Incorporation:	Florida Profit Corporation adopts the following amendment(s) to		
A. If amending name, enter the new name of the corporation:			
name must be distinguishable and contain the word "corporation" ("Corp.," "Inc.," or Co.," or the designation "Corp." "Inc," or word "chartered," "professional association," or the abbreviation	"Co". A professional corporation name must contain the		
B. Enter new principal office address, if applicable:	9120 FOUNTAINEBLEAU BLVD		
(Principal office address <u>MUST BE A STREET ADDRESS</u> )	APTO. 510		
	MIAMI, FL 33172		
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)	9120 FOUNTAINEBLEAU BLVD		
	APTO.510		
	MIAMI, FLORIDA 33172		
D. If amending the registered agent and/or registered office add new registered agent and/or the new registered office address			
Name of New Registered Agent			
(Florida str	reet 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			
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 <math>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: X Change	<u>PT</u>	John Doe	
X Remove	<u>V</u>	Mike Jones	
X Add	<u>sv</u>	Sally Smith	
Type of Action (Check One)	Title	<u>Name</u>	<u>Addres</u> s
1) Change		_	
Add Remove			
2) Change			
Add Remove			
Change Add		<u> </u>	
Remove			
4) Change			
Add Remove			
5) Change			
Add			
6) Change			
Add			
Remove			

amending or adding additional Art ttach additional sheets, if necessary).	(Be specific)		
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an amendment provides for an exc	hanga roclassification	or concellation of ice	ued charec
provisions for implementing the ame	endment if not containe	d in the amendment	itself:
(if not applicable, indicate N/A)			
	<del></del>	<del></del>	, , , , , , , , , , , , , , , , , , ,

	44/05/0044	r flet Secretary O so kolstyle	OF STATE	
The date of each amendment(	s) adoption: 11/05/2014	MAI2ina ni a	C/1	, if other than the
date this document was signed.	4.410.510.4.4	14 NOV 12	FH 12: 2U	
Effective date if applicable:	11/05/2014			
	(no more than 90 d	ays after amendment file	e date)	
Adoption of Amendment(s)	( <u>CHECK ONE</u> )			
The amendment(s) was/were by the shareholders was/we	e adopted by the shareholders. The nure sufficient for approval.	mber of votes cast for th	ne amendment(s)	
	e approved by the shareholders through for each voting group entitled to vote			
"The number of votes	cast for the amendment(s) was/were so	ufficient for approval		
by		.,,,		
•	(voting group)			
The amendment(s) was/were action was not required.	e adopted by the board of directors wit	hout shareholder action	and shareholder	
The amendment(s) was/were action was not required.	e adopted by the incorporators without	shareholder action and	shareholder	
Dated 11/0	5/2014	<del></del>		
Signature	SPC on			
sel	y a director, president or other officer ected, by an incorporator – if in the ha pointed fiduciary by that fiduciary)			
	LAZARO RAMOS			
	(Typed or prin	ed name of person signi	ing)	_
	VICE-PRESIDENT			
	(Title o	of person signing)		<del></del>