# P130000

# 55639

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# **COVER LETTER**

TO: Amendment Section

Tallahassee, FL 32314

Division of Corporations
NAME OF CORPORATION: <u>Gruba Services Corporation</u> DOCUMENT NUMBER: <u>P13000055639</u>
The enclosed Articles of Amendment and fee are submitted for filing.
Please return all correspondence concerning this matter to the following:
Joseph G. Florea  Name of Contact Person
Firm/Company  1413 South Powerline  Address  Pompano Beach Florida 33069  City/ State and Zip Code
E-mail address: (to be used for future annual report notification)
For further information concerning this matter, please call:
Joseph G Florea at (954) 410 - 5597  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:
S35 Filing Fee  Certificate of Status  Certified Copy (Additional copy is enclosed)  S43.75 Filing Fee & S52.50 Filing Fee Certificate of Status (Additional copy is enclosed)
Mailing AddressStreet AddressAmendment SectionAmendment SectionDivision of CorporationsDivision of CorporationsP.O. Box 6327The Centre of Tallahassee

2415 N. Monroe Street, Suite 810

Tallahassee, FL 32303



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## FLORIDA DEPARTMENT OF STATE Division of Corporations

September 28, 2020

JOSEPH G. FLOREA 1413 SOUTH POWERLINE POMPANO BEACH, FL 33069

SUBJECT: ARUBA SERVICES CORPORATION

Ref. Number: P13000055639

We have received your document for ARUBA SERVICES CORPORATION 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 name designated in your document is unavailable because it is the same as or not distinguishable from an existing entity. If the principals are the same in both entities, please send a letter or affidavit advising us of this association, along with your articles so that we may complete the filing process.

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.

Irene Albritton Regulatory Specialist II

Letter Number: 520A00018626

www.sunbiz.org

#### ARTICLES OF AMENDMENT

October 15, 2020

Joseph G. Florea 1413 South Powerline Pompano Beach, FL 33069

SUBJECT: ARUBA SERVICES CORPORATION

Ref. Number: P13000055639

### Affidavit Adoption of Amendment(s)

STATE OF Florida
COUNTY OF Broward

Before me, the undersigned authority, personally appeared <u>JOSEPH G FLOREA</u> ("Affiant"), who, after being first duly sworn, deposes and says of his/her personal knowledge the following:

- 1. He/she is the <u>JOSEPH FLOREA</u> (title of affiant), of ARUBA SERVICES CORPORATION and ARUBA PERMIT SERVICES CORPORATION which does business in the state of Florida, hereinafter referred to as the "Full Sole Owner of both Corporations."
- 2. The amendment(s) was/were adopted by the incorporators, or board of directors without shareholder action and shareholder action was not required.

Signed, sealed, and delivered this 15 day of October, 2020

Contrission # GG 71677 My Commission Expires February 00, 2021

Company Name: ARUBA PERMIT SERVICES CORPORATION
By:
Printed Name JOSEPH G FLOREA
Title: OWNER / PRESIDENT
State of Florida
County of BROWARD
Sworn and subscribed to before me, a Notary Public, this
(Notary Seal)
Notary Public Printed Name: Chrotica Roman
CHEISTINA MARIE EOMAN I

### Articles of Amendment

Articles of Inco	poration .
aruba Services	Coconstation
(Name of Corporation as currently	filed with the Florida Dept. of State)
$\mathcal{D}_{12000}$	055/29
(Document Number of C	Corneration (if known)
(Document Admirer of C	corporation (it known)
Pursuant to the provisions of section 607.1006, Florida Statutes, this <i>F1</i> its Articles of Incorporation:	orida Profit Corporation adopts the following amendment(s) to
A. If amending name, enter the new name of the corporation:  QQQQ Peq MIS Coname must be distinguishable and contain the word "corporation," "con" "Inc.," or Co.," or the designation "Corp," "Inc," or "Co". A proceed," "professional association." or the abbreviation "P.A."	
B. Enter new principal office address, if applicable: (Principal office address <u>MUST BE A STREET ADDRESS</u> )	202
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)	υ. ΞΞ     
D. If amending the registered agent and/or registered office address new registered agent and/or the new registered office address:	ss in Florida, enter the name of the
Name of New Registered Agent	
tFlorida stree	address)
New Registered Office Address:	, Florida
10	rity) , Florida (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

Check if applicable

 $\square$  The amendment(s) is/are being filed pursuant to s. 607.0120 (11) (e), F.S.

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: X Change	<u>PT</u>	John Doe	
X Remove	$\underline{\mathbf{V}}$	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			
Remove			
4) Change			
Add			
Remove			
5) Change			
Add			
Remove			-
6) Change			
Add			
Remove			

ttach <i>addit</i>	or adding additional Arti onal sheets, if necessary).	(Be specific)	. <u>.                                   </u>		
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an amend	nent provides for an excl	iange, reclassific	cation, or cancel	lation of issued sh	ares,
orovisions   (if not a	or implementing the ame pplicable, indicate N/A)	ndment if not co	ontained in the a	<u>imendment itselt:</u>	
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The date of each amendment(s) a date this document was signed.	doption:	, if other than the
Effective date if applicable:		
rifective date in applicable.	(no more than 90 days after amendment file dat	(9)
Note: If the date inserted in this locument's effective date on the D	block does not meet the applicable statutory filing requireme epartment of State's records.	nts, this date will not be listed as the
Adoption of Amendment(s)	(CHECK ONE)	
The amendment(s) was/were ad action was not required.	opted by the incorporators, or board of directors without share	holder action and shareholder
☐ The amendment(s) was/were ad by the shareholders was/were s	opted by the shareholders. The number of votes cast for the a afficient for approval.	mendment(s)
	proved by the shareholders through voting groups. The follow each voting group entitled to vote separately on the amendment	
"The number of votes cas	for the amendment(s) was/were sufficient for approval	
by	(voting group)	
selecte	director, president or other officer – if directors or officers have d, by an incorporator – if in the hands of a receiver, trustee, of ted foliciary by that fiduciary)  JOSEPH B Flore a (Typed or printed name of person signing)  Clitle of person signing)	