013000078705

(Requestor's Name)
(Address)
(1001000)
(Address)
(City/State/Zip/Phone #)
PICK-UP WAIT MAIL
(Business Entity Name)
(Document Number)
,
Certified Copies Certificates of Status
Special Instructions to Filing Officer:
operations to 1 ming officer.
mad snowe

Office Use Only



100300270481

O6/20/17--01030--001 ♦★35.00



Sumo

COVER LETTER

TO: Amendment Section Division of Corporations

A-ABLE RESTORATION, INC. NAME OF CORPORATION:	· · · · · · · · · · · · · · · · · · ·
P13000078705 DOCUMENT NUMBER:	
The enclosed Articles of Amendment and fee are submitted for fili	ng.
Please return all correspondence concerning this matter to the follo	owing:
Sandra Burbano	
(Name of Co	ontact Person)
A-ABLE RESTORATION, INC.	
(Firny C	Company)
6619 South Dixie Highway Suite 258	
(Ade	dress)
MIAMI, FL 33143	
(City/ State a	and Zip Code)
AABLERESTORATION@live.com	
E-mail address: (to be used for future an	nnual report notification)
or further information concerning this matter, please call:	
Sandra Burbano	786-347-5835 str 51559
(Name of Contact Person)	(Area Code) (Daytime Telephone Number)
Enclosed is a check for the following amount made payable to the I	Florida Department of State:
\$35 Filing Fee \$\Bigcup \\$43.75 Filing Fee & \Bigcup \\$43.75 Filing Fee &	•

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

Certificate of Status

(Additional Copy is Enclosed)

Certified Copy



June 29, 2017

SANDRA BURBANO A-ABLE RESTORATION, INC. 6619 SOUTH DIXIE HIGHWAY, SUITE 258 MIAMI, FL 33143

SUBJECT: A-ABLE RESTORATION, INC.

Ref. Number: P13000078705

We have received your document for A-ABLE RESTORATION, INC. and your check(s) totaling \$70.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

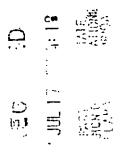
The form you submitted is for a Florida Non-Profit Corporation, but your entity is a Florida Profit Corporation. Please complete and return the enclosed blank form(s).

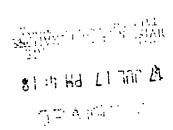
Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

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

Diane Cushing Senior Section Administrator

Letter Number: 717A00013164





www.sunbiz.org

Articles of Amendment to Articles of Incorporation of

Å	A 1 1	Nact.	$-\mathbf{L}_{i}$
A .	1401c	Resta	4710 M

(Name of Corporation as currently	filed with the Florida Dept. of State)
P130000 78705	
(Document Number of	Corporation (if known)
Pursuant to the provisions of section 607.1006, Florida Statutes, this <i>F</i> its Articles of Incorporation:	Clorida Profit Corporation adopts the following amendment(s)
A. If amending name, enter the new name of the corporation:	
	The new
name must be distinguishable and contain the word "corporation." "Corp.," "Inc.," or Co.," or the designation "Corp." "Inc." or "C word "chartered," "professional association," or the abbreviation "F	'o". A professional corporation name must contain the
B. Enter new principal office address, if applicable:	
(Principal office address <u>MUST BE A STREET ADDRESS</u>)	
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	ess in Florida, enter the name of the
new registered agent and/or the new registered office address:	
Name of New Registered Agent	
(Florida stre	and James
(r toriuu sire	et dauress)
New Registered Office Address:	City)
·	
New Registered Agent's Signature, if changing Registered Agent: I hereby accept the appointment as registered agent. I am familiar w	ith and accept the obligations of the position.
	i de la companya de
Signature of New Re	gistered Agent, if changing
	-4 . 상

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: XChange	<u>PT</u> John D	Ooe	
X Remove	<u>V</u> <u>Mike J</u>	ones	
X Add	<u>SV</u> <u>Sally S</u>	<u>Smith</u>	
Type of Action (Check One)	Title	Name	<u>Addres</u> s
1) Change Add Remove	Presi Jant	Blanca Brigos Bribano	6619 South Dixie Highway Suite 258 Miani, PL 33143
2) Add	<u></u>	Blanca Burgos Burbans	6619 South Dixie Highway Suite 258
Remove 3) Change Add	P <u>c-silent</u>	Sandia Bolbano	Miami, FL 23143 6619 South Vixiettighus Suite 258
4) Change Add			Migmi FL 33/43
Remove 5) Change Add Remove			
6) Change Add			

L. If amending or adding additional Articles, enter change(s) here: (Attach additional sheets, if necessary). (Be specific)		
	<u> </u>	
		
		
<u> </u>		
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)		
	_	

The date of each amendment(s) adoption:	, if other than the
date this document was signed.	
Effective date if applicable: 07/11/2017	
(no more than 90 days after amendment file date)	
Note: If the date inserted in this block does not meet the applicable statutory filing requirements, this date document's effective date on the Department of State's records.	te will not be listed as the
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 statemer must be separately provided for each voting group entitled to vote separately on the amendment(s):	ent
"The number of votes east for the amendment(s) was/were sufficient for approval	
by" (voting group)	
(voting group)	
☐ The amendment(s) was/were adopted by the board of directors without shareholder action and shareholde action was not required.	т
The amendment(s) was/were adopted by the incorporators without shareholder action and shareholder action was not required.	
Signature (By a director, president or other officer of directors or officers have not been	
selected, by an incorporator – if in the hands of a receiver, trustee, or other cour appointed fiduciary by that fiduciary)	t
Sandra Burbano	
(Typed or printed name of person signing)	
President	
(Title of person signing)	