## P13000081858

(Re	equestor's Name)			
(Ad	ddress)			
(Ac	ddress)			
(C	ty/State/Zip/Phone	e #)		
PICK-UP	☐ WAIT	MAIL		
(Bi	usiness Entity Nar	me)		
(Document Number)				
Certified Copies	Certificates	s of Status		
Special Instructions to Filing Officer:				





800252689078

10/21/13--01017--031 \*\*35.00

FILED

13 NOV 15 PH 3: 28

m ///son

## **COVER LETTER**

**TO:** Amendment Section Division of Corporations

NAME OF CORPO	RATION: ABMT ENT	ERPRISES CO	RP
DOCUMENT NUM	BER:		
The enclosed Articles	s of Amendment and fee are su	bmitted for filing.	
Please return all corre	espondence concerning this ma	tter to the following:	
	ALBENY SOBRI	NHO	
		Name of Contact Person	1
		Firm/ Company	
	670 NW 37th St		
	Pompano Beach	Address FL 33064	
		City/ State and Zip Cod	e
For further information	on concerning this matter, pleas	sed for future annual report se call: at (954	notification)
Name	of Contact Person		de & Daytime Telephone Number
Enclosed is a check f	or the following amount made	payable to the Florida Depa	artment 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)
An Div P.C	niling Address nendment Section vision of Corporations D. Box 6327 lahassee, FL 32314	Amend Divisio Clifton 2661 E	Address Iment Section on of Corporations Building Executive Center Circle assee, FL 32301



## FLORIDA DEPARTMENT OF STATE Division of Corporations

October 25, 2013

ALBENY SOBRINHO 670 NW 37TH ST POMPANO BEACH, FL 33064

SUBJECT: ABMT ENTERPRISES CORP

Ref. Number: P13000081858

We have received your document for ABMT ENTERPRISES CORP 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 check the appropriate box on the amendment form regarding the adoption of the amendment(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.

Carol Mustain Regulatory Specialist II

Letter Number: 613A00025008

## Articles of Amendment to Articles of Incorporation

ADM ENTERMICES CO	<u> </u>
(Name of Corporation as currently filed with the F	Florida Dept. of State)
(Document Number of Corporation (i	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:	
	The new
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: (Principal office address MUST BE A STREET ADDRESS)	670 NW 37 ST POMPANO BCH PL
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)	33064 670 MW 37 ST 3 7 POMPANO BZH EL 3 7
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 ALBEM	SOBRINAO
New Registered Office Address: Poly 174 C	7 ST POMPANO 13CH FL 33CL) reel address)
New Registered Office Address: Poly 1741	<u> 33064</u> , Florida <u>33064</u> (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	with and accept the obligations of the position.

· ·	
If amending the Officers and/or Directors, enter the title a	nd 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	<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	Р	ALBENY SOBRINHO	670 NW 37th St
Add			Pompano Beach FL 33064
Remove			
2) Change			
Add			
Remove			
3) Change			
Add			
Remove			
4) Change			
Add			
Remove			
5) Change			
Add			
Remove			
6) Change			
Add	-		
Remove			

ttach additional sheets, if necessary).	(Be specific)			
	<u>.</u>	<del> </del>		
-			_	
	<del></del>			
			<del>_</del>	
		<del></del>		
***				
				** **
		ion, or cancellation	n of issued sha	res,
f an amendment provides for an exch	iange, reclassificat	-1		
provisions for implementing the ame	nange, reclassificatendent if not cont	ained in the amer	idment itself:	
f an amendment provides for an exch provisions for implementing the ame (if not applicable, indicate N/A)	nange, reclassificatendent	ained in the amei	idment itself:	
provisions for implementing the ame	nange, reclassificate	ained in the ame	idment itself:	
provisions for implementing the ame	nange, reclassificat	ained in the ame	idment itself:	
provisions for implementing the ame	nange, reclassificat	ained in the amei	dment itself:	
provisions for implementing the ame	nange, reclassificat	ained in the amei	idment itself:	
provisions for implementing the ame	nange, reclassificat	ained in the amei	idment itselt:	
provisions for implementing the ame	nange, reclassificat	ained in the ame	dment itselt:	
provisions for implementing the ame	nange, reclassificat	ained in the amei	dment itself:	
provisions for implementing the ame	nange, reclassificat	ained in the amei	idment itself:	
f an amendment provides for an exch provisions for implementing the ame (if not applicable, indicate N/A)	nange, reclassificat	ained in the ame	dment itselt:	
provisions for implementing the ame	nange, reclassificat	ained in the ame	dment itself:	

The date of each amendment(s) ad date this document was signed.	option:	, if other t
Effective date <u>if applicable</u> :		
	(no more than 90 days after amendment file date)	
Adoption of Amendment(s)	(CHECK ONE)	
The amendment(s) was/were adopty the shareholders was/were suf	pted by the shareholders. The number of votes east for the amendment(s) fficient for approval.	
	roved by the shareholders through voting groups. The following statement each voting group entitled to vote separately on the amendment(s):	
	for the amendment(s) was/were sufficient for approval	
by	(voting group)	
action was not required.	pted by the board of directors without shareholder action and shareholder pted by the incorporators without shareholder action and shareholder	
Dated 10-17-20	013	
selected	rector, president or other officer – if directors or officers have not been l, by an incorporator – if in the hands of a receiver, trustee, or other court ed fiduciary by that fiduciary)	
-	ALBENY SOBEINHO (Typed or printed name of person signing)	_
-	PRESIDENT (Title of person signing)	

the