P13000092181

(Req	uestor's Name)	
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(City	/State/Zip/Phone	· #)
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COVER LETTER

TO: Amendment Section
Division of Corporations

Bividion of Corpor			
NAME OF CORPOR	ATION: A & A Pro ER: P130000921	ductions & Ca	atering, Inc.
DOCUMENT NUMB	ER: 1 1000002		
The enclosed Articles of	of Amendment and fee are sub	omitted for filing.	
Please return all corresp	pondence concerning this mat	ter to the following:	
	Aland Pierre-C	anel	
-		Name of Contact Persor	1
4	Aland Pierre-Ca	anel, CPA, LL	.C
-		Firm/ Company	
	12794 W. Dixie	Hwy	
-		Address	
	N. Miami, FL 3	3161	
-	·	City/ State and Zip Cod	ē
and	pasolutions@g	rmail com	
ape	F-mail address: (to be us	ed for future annual report	notification)
	D man addition (to be an	va tor tatare asimum report	
For further information	concerning this matter, pleas	e call:	
Aland Pierre	e-Canel	at (305	, 892-8565
Name o	f Contact Person	Area Co	de & Daytime Telephone Number
Enclosed is a check for	the following amount made p	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)
	ling Address adment Section		Address Iment Section

Amendment Section
Division of Corporations
P.O. Box 6327
Tallahassee, FL 32314

Amendment Section
Division of Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, FL 32301

Articles of Amendment to Articles of Incorporation of

P130000092181	Florida Dept. of State)	
(Document Number of Corporation	(if known)	
Pursuant to the provisions of section 607.1006, Florida Statutes, this its Articles of Incorporation:		amendment(s) to
A. If amending name, enter the new name of the corporation:		
name must be distinguishable and contain the word "corporati "Corp.," "Inc.," or Co.," or the designation "Corp," "Inc," or word "chartered," "professional association," or the abbreviation B. Enter new principal office address, if applicable: (Principal office address MUST BE A STREET ADDRESS)	on," "company," or "incorporated" or the abl "Co". A professional corporation name must co	The new breviation ontain the
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)	230 NE 121 Ter N. Miami, FL 33161	
D. If amending the registered agent and/or registered office ad new registered agent and/or the new registered office addre		SECRE IN SECRE OF THE
Name of New Registered Agent 230 NE 121	Ter	<u>-</u> 5 [™]
	treet address) , Florida 33161	AMII:47

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	<u>v</u>	Mike Jones	
X Add	<u>sv</u>	Sally Smith	
Type of Action (Check One)	<u>Title</u>	<u>Name</u>	<u>Addres</u> s
1) Change	PT	Luckson Hippolyte	230 NE 121 Ter
Add			N. Miami, FL 33161
Remove			
2) Change	V	Aline Justilien	230 NE 121 Ter
Add			N. Miami, FL 33161
Remove			
3) Change			
Add			
Remove			
4) Change			
Add			
Remove			
5) Change			
Add			
Remove			· · · · · · · · · · · · · · · · · · ·
6) Change			
Add			
Remove			
L. L. Melliove			

E. If amending or adding additional Articles, enter change(s) here: (Attach additional sheets, if necessary). (Be specific) Article VI. The name and address of the incorporator is:
Luckson Hippolyte, 230 NE 121 Ter, N. Miami, FL 33161
•
,
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)

ne date of each amendment(s) adoption:	, if other than the
date this document was signed.	
Effective date if applicable: 1112014	
Effective date if applicable:	
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 11/18/13	
Signature Signature	
(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)	
Luckson Hippolyte	
. (Typed or printed name of person signing)	
. (Types of printed name of person signing)	
President	
(Title of person signing)	