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SECRETARY OF STATE

MAY 1 5 2014 C. CARROTHERS

## **COVER LETTER**

TO: Amendment Section
Division of Corporations

NAME OF CORPORATION: ELA DOCUMENT NUMBER: P14	Removal, INC. 1000006705		
The enclosed Articles of Amendment and fee are su	bmitted for filing.		
Please return all correspondence concerning this man	tter to the following:		
_	Name of Contact Person  Removal 112  Firm/ Company		
5250 N. H	Address City/ State and Zip Code		
E-mail address: (to be used for future annual report notification)			
For further information concerning this matter, please call:			
Evan Dribin Name of Contact Person	at (994) 444-5338  Area Code & Daytime Telephone Number		
Enclosed is a check for the following amount made payable to the Florida Department of State:			
\$35 Filing Fee \$\text{Certificate of Status}\$	□\$43.75 Filing Fee & □\$52.50 Filing Fee Certified Copy (Additional copy is enclosed)  □\$52.50 Filing Fee Certificate of Status 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

## Articles of Amendment to Articles of Incorporation of

ERA Removal	lnc		
(Name of Co	rporation as currently filed	with the Florida Dept. of State)	
20520000019	<u>.</u>		
	(Document Number of Corp	oration (if known)	
Pursuant to the provisions of section 607.1006 its Articles of Incorporation:	, Florida Statutes, this <i>Floria</i>	la Profit Corporation adopts the following	20 HAY
A. If amending name, enter the new name of	f the corporation:		TARY The Thew P
name must be distinguishable and contain the "Corp.," "Inc.," or Co.," or the designation word "chartered," "professional association,"	"Corp," "Inc," or "Co".	company," or "incorporated" or the ab A professional corporation name must c	breviation =
B. Enter new principal office address, if ap (Principal office address <u>MUST BE A STREE</u>			
C. Enter new mailing address, if applicable (Mailing address MAY BE A POST OFF)  D. If amending the registered agent and/or new registered agent and/or the new reg	CE BOX)  registered office address in	Florida, enter the name of the	
Name of New Registered Agent			
<del></del>	(Florida street add	dress)	
New Registered Office Address:		, Florida	
	(City)	(Zip C	lode)
New Registered Agent's Signature, if chang I hereby accept the appointment as registered		nd accept the obligations of the position.	
	Signature of New Registe	red 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 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.

X Change	<u>PT</u> <u>Joh</u>	n Doe	
X Remove	<u>V Mil</u>	ce Jones	
X Add	<u>SV</u> <u>Sall</u>	ly Smith	
Type of Action (Check One)	Title	Name	Address
1) Change	<u>V</u>	Rosa Ortiz	5250 N. Hills Dr
X Add			Halywood, FC 33021
Remove			
2) Change			
Add			
Remove			<del></del>
3) Change			
Add			
Remove		·	
4) Change	<del></del>		
Add			
Remove			
5) Change			
Add			<del></del>
Remove			
6) Change			
Add			
Remove			

Attach addition	adding additional Articles, enter change(s) here: al sheets, if necessary). (Be specific)
	NA
<u></u>	
<del> </del>	
f an amendme	nt provides for an exchange, reclassification, or cancellation of issued shares, implementing the amendment if not contained in the amendment itself:
provisions for (if not app	implementing the amendment it not contained in the amendment itself: licable, indicate N/A)
	NA

The date of each amendment(s) ad date this document was signed.	option:	, if other than the
Effective date <u>if applicable</u> :	5.6.15	
A REPRESENTATION	(no more than 90 days after amendment file	e date)
Note: If the date inserted in this bl document's effective date on the Dep	ock does not meet the applicable statutory filing requir partment of State's records.	rements, this date will not be listed as the
Adoption of Amendment(s)	( <u>CHECK ONE</u> )	
☐ The amendment(s) was/were adop by the shareholders was/were suf	oted by the shareholders. The number of votes cast for the ficient for approval.	ne amendment(s)
	roved by the shareholders through voting groups. The foreach voting group entitled to vote separately on the ame	
"The number of votes cast f	or the amendment(s) was/were sufficient for approval	
by	(voting group)	
action was not required.  The amendment(s) was/were adoption was not required.	oted by the board of directors without shareholder action of the board of directors without shareholder action and	
Dated 5 · C	0·15	
selected	rector, president or other officer — if directors or officers, by an incorporator — if in the hands of a receiver, trusteed fiduciary by that fiduciary)	
_	Evan Dribin	
	(Typed or printed name of person signing)	
_	President	
	(Title of person signing)	