Division of Corporations

Puge 1 of 1

### Florida Department of State Division of Corporations Electronic Filing Cover Sheet

Note: Please print this page and use it as a cover sheet. Type the fax audit number (shown below) on the top and bottom of all pages of the document.

(((H14000121763 3)))



Note: DO NOT hit the REFRESH/RELOAD button on your browser from this page. Doing so will generate another cover sheet.

To:

Division of Corporations

Fax Number : (850)617-6380

From:

Account Name : CORP USA Account Number : 072450003255 : (305)634~3694 Phone Fax Number : (786)409~5946

\*\*Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please.\*\*

Email Address:

### **COR AMND/RESTATE/CORRECT OR O/D RESIGN** LISE CONSULTING, CORP.

Certificate of Status	0
Certified Copy	0
Page Count	06
Estimated Charge	\$35.00

MAY 23 2014

C. CARROTHERS

Electronic Filing Menu

Corporate Filing Menu

Help

https://efile.sunbiz.org/scripts/efilcovr.exe

n.

3026339696

5/22/2014 02/55/5014 10:43



# 414000 121763

#### COVER LETTER

TO: Amendment Section Division of Corporations

militarion de deche	· · · · · · · · · · · · · · · · · · ·		
name of corpor		BULTING CORF	<u> </u>
DOCUMENT NUMB	ER. P1400000809	<u> </u>	<del></del>
The enciosed Articles	of Amendment and foo are su	bruitted for filing.	
Please return all corres	pondence concerning this ma	tter to the following:	
	MARIA PAGAN		
· · ·	······································	Name of Contact Person	1
	LISE CONSULTI	NG CORP	
•		Firm/ Company	
	4033 SW 96 AVE		
•		Address	
	MIAMI, FLORIDA	33165	
•		City/ State and Zip Cod.	1
lise	consultingcorp@g	gmail.com	
	E-mail address: (to be us	ed for future annual report	notification)
For further information	concerning this maner, pleas	e call:	
MIRIAM FUN	DORA	<sub>et</sub> (305	, 559-8356
Name o	Contact Person	Area Co	de & Daytime Telephone Number
Enclosed is a check for	the following amount made	payable to the Florida Depa	uriment of Siste:
S35 Filing Fee	□\$43.75 Filing Foe & Certificate of Status	S43.75 Filing Pee & Certified Copy (Additional copy is erclosed)	S52.50 Filing Fee Certificate of Status Certified Copy (Additional Copy

Meiling 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

is enclosed)

H14000121763

### Articles of Amendment Articles of Incorporation

14 MAY 22 AM 8: 54

SECRETARY CARACTER ALLAHASSEE, FLORIDA

(Name of Corporation in currently filed with the Florida Dept. of Scate) P14000008093 (Document Number of Corporation (if known) Pursuant to the provisions of section 607.1006, Florida Stanues, this Florida Profit Corporadon adopts the following amendment(s) to its Articles of Incorporation:

A. If amending pame, enter the new name of the corporation:

name must be distinguishable and contain the word "corporation," "company," or "incorporated" or the abbreviation "Corp.," "Inc.," or Co.," or the designation "Corp.," "Inc.," or "Co., A professional corporation name must contain the word "chartered," "professional association," or the abbreviation "P.A." 4033 SW 96 AVE B. Exter now principal office address, if applicable: (Principal office address MUST BE A STREET ADDRESS) MIAMI FLORIDA 33165 C. Enter new mailing address, if applicable;
(Mailing address MAT BE A POST OFFICE BOX) SAME ABOVE

D. If amending the registered agent and/or registered office address in Florids, onter the name of the new registered agent and/or the new registered office address:

Name of New Registered Agent

MARIA PAGAN

11275 SW 88 STREET K-202

(Florida street address)

MIAMI FLORIDA

New Registered Agent's Signature At Changing Registered Agent;

I hereby accept the appointment expressivated agent. I fam familiar with and accept the obligations of the position.

Signature of New Registered Agent, if changing

Page 1 of 4

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;

(Anoch additional sheets, if necessary)

(Attach admittant thesis, y necessary)

Please note the officer/director title by the first letter of the office title:

P = President; V = Vice President; T = Treasurer; S = Secretary; O = 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 officer.

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, Saily Smith is named the V and S. These should be noted as John Doe, PT as a Change, Mike Jones, V as Remove, and Saily Smith, SV as an Add.

X Change	PI	John Doe				
X Remove	¥	Mike Jones				
X Add	. <u>27</u>	Sally Smith				
Type of Action (Cheek One)	Title	<u>Name</u>	Address			
1) Change	PT	JOSE GABRIEL RECHUSKY	4033 SW 96 AVE			
Ada		•	MIAMI			
Remove			FLORIDA 33165			
2) Change	PT	MARIA PAGAN	11275 SW 88 STREET			
✓ ∧dd			K-202			
Romove			MIAMI FLORIDA 33165			
3) Change						
Add			·			
Remove		,				
4) Change						
Add						
Remove						
5) Change						
Add						
Remove						
6) Change						
Add						
Remove						

Page 2 of 4

	idisional sheet	additional Art r, if necessary).	(Be specific)			
			•		•	
	•					
	<del></del> -					
			*			
			·			
			<del></del>			
					· <del></del>	
		_				
•						
					, /Biss.	
		· ·	<del></del> -		<del></del>	
	- d					
	ng for implem	OCS 101 AN EXCH	andre Hechassin	eation, or cancella entained in the ar	TO NOT TRAILEG AN	Les
an ame	24 105 11924511	indicase N/A)	Hatter in the E	AUTORITHE ATTEMENT	Conducti teen:	
royistor	n appacable. I					
royistor	n appacable. I					
royistor	ot applicable. I					
royistor	of opplicable.					
royistor	of applicable.					
royistor	п оррпсаыв. 1					
royistor	о оррпсаыв. 1					
royistor	н аррпсаыв. 1					
royistor	н аррпсаыв. 1					
royistor	н аррпсаыв. 1					
royistor	н аррпсаыв.					
royistor	н аррпсаыв.					
royistor	н аррпсаыв.					
royistor	н аррпсаыв.					

Page 3 of 4

## 414020121763

The data of each amendmen	t(s) adoption: 05/21/2014	if other than the
date this document was signed		
Effective date if applicable:	05/21/2014	
	(no more than 90 days after amendment file date)	
Adoption of Amendment(s)	(CHECK ONE)	
	re adopted by the shareholders. The number of votes cast for the amendment(s) ere sufficient for approval.	
	re approved by the shareholders through voting groups. The following statement ed for each voting group entitled to vote separately on the amendment(s):	
	s cast for the amendment(a) was/were sufficient for approval	
by	(wdng group)	
	(widning group)	•
The unundment(s) was/was action was not required.	re adopted by the board of directors without shareholder action and shareholder	
The amendment(s) was/we action was not required,	se adopted by the incorporators Without shareholder action and shareholder	
Dated_05/2	21/2014	
Signature		
Š.	By a director, president or other officer — if directors or officers have not been blested, by an incorporator — if in the hands of a receiver trustee, or other court ppointed fiduciary by that fiduciary)	
	MARIA PAGAN CLICE HISTUI	
	(Typed of printed name of partial signing)	
	PRESIDENT -	
	(Title of person signing)	<u> </u>

Page 4 of 4