JUL-414-2014 MON 03:28 PM Division of Corporations



Florida Department of State

Division of Corporations **Electronic Filing Cover Sheet**

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Division of Corporations

Fax Number : (850)617-6380

From:

Account Name : ALPHA BUSINESS CONSULTING, LLC

Account Number : I20080000061 Phone : (407) 582-9830 ·: (407)294-7677

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COR AMND/RESTATE/CORRECT OR O/D RESIGN KALIL SEVEN SERVICES CORP

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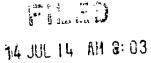
Corporate Filing Menu

Help

COVER LETTER

Division of Cor						
NAME OF CORPO	DRATION: KALIL SEV	'EN SERVICES	CORP			
DOCUMENT NUM	PAADOOOOQA					
The onclosed Article	s of Amendment and fee are su	bmitted for filing.				
Please return all corr	espondence concerning this ma	tter to the following:				
	MARIA PINHEIR	0				
		Name of Contact Person	1			
	ALPHA BUSINESS CONSULTING, LLC					
		Firm/Company				
	7022 CARLENE DR					
	•	Address				
	ORLANDO, FL 3					
		City/ State and Zip Code	•			
pir	nheiromaria@att.ne	et				
<u></u>	E-mail address: (to be us	ed for future annual report	notification)			
	,					
For further information	on concerning this matter, pleas	e call:				
MARIA PINHEIRO		at (407	582-9830 de & Daytime Telephone Number			
Name	of Contact Person	Area Co	de & Daytime Telephone Number			
Enclosed is a check for	or the following amount made p	payable to the Florida Depa	rtment 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)			
<u> Ma</u>	lling Address	Street	Address			
Amendment Section		Amendment Section				
Division of Corporations		Division of Corporations				
P.O. Box 6327 Clifton Building Tallahassee, FL 32314 2661 Executive Center Circle						
1 60	umusoo, 11 52517		ssee, FL 32301			

Articles of Amendment to Articles of Incorporation of



	of the second of
KALIL SEVEN SERVICES C	
	itly filed with the Florida Dept. of State)
P14000009848	
(Document Numb	per of Corporation (if known)
Pursuant to the provisions of section 607.1006, Fl is Articles of Incorporation:	lorida Statutes, this Florida Profit Corporation adopts the following amendment
. If amending name, enter the new name of the	the corporation:
	The new
name must be distinguishable and contain the "Corp.," "Inc.," or Co.," or the designation "Co word "chartered," "professional association," or	word "corporation," "company," or "incorporated" or the abbreviation Corp," "Inc," or "Co". A professional corporation name must contain the or the abbreviation "P.A."
3. <u>Enter new principal office address, if applic</u> Principal office address <u>MUST BE A STREET</u>	cable: 'ADDRESS')
Enter new mailing address, if applicable: (Mailing address MAX BE A POST OFFICE	F BOY)
Transing with cos trays out 132 Out Of 1402	
 If amending the registered agent and/or reg new registered agent and/or the new register 	gistered office address in Florida, enter the name of the ered office address:
Name of New Registered Agent	
	(Florida street address)
New Registered Office Address:	, Fiorida (Zip Code)

Signature of New Registered 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.

Example: <u>X</u> Change	<u>PT</u>	John D	<u>oe</u>		
X Remove	<u>v</u>	Mike Jones			
X Add	<u>sv</u>	Sally Smith			
Type of Action (Check One)	Title		Name	Address	
1) Change	VP		MARILYN PEREZ LEYVA	6123 METROWEST BLVD	
Add			•	APT 115	
Remove				ORLANDO, FL 32835	
2) Change		_ ,			
Add				————————————————————————————————————	
Remove					
3) Change		_		••• · · · · · · · · · · · · · · · · · ·	
Add					
Remove					
4) Change	****				
Add					
Remove				<u></u>	
5) Change		_			
Add					
Remove					
6) Change		-			
Add					
Remove					

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f an amendment provide provisions for implemen (if not applicable, ind	iting the amen	dment if not cor	tained in the am	tion of issued sha endment itself:)(C\$,

The date of each amendment(s) adoption: 07/14/2014 date this document was signed.	, if other than the
Effective date <u>if applicable</u> : (no more than 90 days after amendment file date)	
Adaption 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	
Signature × mail Kall	
(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)	
NAGIB KALIL	
(Typed or printed name of person signing)	_
PRESIDENT	
(Title of person signing)	