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PICK-UP	☐ WAIT	MAIL
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COVER LETTER

TO: Amendment Section
Division of Corporations

NAME OF CORPORATION: B & L SER	VICES PROPER	RTY, CORP
DOCUMENT NUMBER: P1400002528		
The enclosed Articles of Amendment and fee are sub	omitted for filing.	
Please return all correspondence concerning this mat	ter to the following:	
ANDY LASTRE		
	Name of Contact Person	1
AL PRO FINANC	IAL SERVICES	
	Firm/ Company	· · · · · · · · · · · · · · · · · · ·
P.O. BOX 248423	3	
	Address	
HIALEAH, FL. 33	002	
-	City/ State and Zip Code	•
ANDRESLASTRE10	0@GMAIL.COM	1
E-mail address: (to be use	ed for future annual report	notification)
For further information concerning this matter, pleas	e call:	
JULIO LEMUS BULLAIN	at (786	370-6111
Name of 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 & 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	Amend Division Clifton 2661 E	Address ment Section on of Corporations Building xecutive Center Circle

Articles of Amendment to Articles of Incorporation of

B & L SERVICES PROPERTY CORP

(Name of Corporation as currently	v filed with the Florida I	Dept. of State)		_
P14000025288		your or sure		
(Document Number	of Corporation (if known)		-
Pursuant to the provisions of section 607.1006, Florits Articles of Incorporation:	rida Statutes, this <i>Florida</i>	Profit Corporation ado	ots the following	g amendment(s) to
A. If amending name, enter the new name of the	corporation:			
			<u> </u>	_The new
name must be distinguishable and contain the w "Corp.," "Inc.," or Co.," or the designation "Co. word "chartered," "professional association," or the	orp," "Inc," or "Co". A	mpany," or "incorpora I professional corporati	ited" or the a on name must	bbreviation contain the
B. Enter new principal office address, if applical (Principal office address MUST BE A STREET A)				-
				-
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE E	<u>BOX</u>)			-
D. If amending the registered agent and/or registered new registered agent and/or the new registered		florida, enter the name	of the	ECRETAR) SION BE IT
Name of New Registered Agent				RY OF STATE
	(Florida street addre	ess)		## X X X X X X X X X X X X X X X X X X
New Registered Office Address:	(City)	, Florida	(Zip Code)	二
	(Cuy)		(Zip Code)	
New Registered Agent's Signature, if changing R I hereby accept the appointment as registered agent		l accept the obligations o	f the position.	
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: 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	P	BULLAIN LEMUS, JULIO	17201 NW 18 AVENUE
Add			MIAMI GARDENS,FL
Remove			33056
2) Change			
Add			
Remove			
3) Change			
Add			
Remove			·
4) Change			
Add			
Remove			
5) Change			
Add			
Remove			
6) Change			
Add			
Remove			

amending or adding additional Artic tach additional sheets, if necessary).	(Be specific)		
			<u></u> .
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		-	
	-		
an amendment provides for an exch	ange, reclassificatio	on, or cancellation	of issued shares,
rovisions for implementing the ame (if not applicable, indicate N/A)	ndment if not conta	ined in the amend	ment itself:
(3			
	,		
		····	
			

The date of each amendment(s) ado	ption:	, if other than the
date this document was signed.		
Effective date if applicable:		
	(no more than 90 days after amendment file date)	
Adoption of Amendment(s)	(CHECK ONE)	
The amendment(s) was/were adop by the shareholders was/were suff	ted by the shareholders. The number of votes cast for the amendment(s) icient for approval.	
The amendment(s) was/were appromust be separately provided for ea	oved by the shareholders through voting groups. The following statement ach voting group entitled to vote separately on the amendment(s):	
"The number of votes cast fo	or the amendment(s) was/were sufficient for approval	
by		
	(voting group)	
The amendment(s) was/were adop action was not required.	ted by the board of directors without shareholder action and shareholder	
The amendment(s) was/were adop action was not required.	ted by the incorporators without shareholder action and shareholder	
Dated03/25/20	014	
Signature	The state of the s	
(By a dir selected,	ector, president or other officer – if directors or officers have not been by an incorporator – if in the hands of a receiver, trustee, or other court diductary by that fiductary)	
	JULIO LEMUS BULLAIN	
-	(Typed or printed name of person signing)	
	PERSIDENT	
_	(Title of person signing)	