P14000035091

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COVER LETTER

TO: Amendment Section Division of Corporations

NAME OF CORPORATION: STORE 17, INC	<u>C</u>
DOCUMENT NUMBER: P14000035091	
The enclosed Articles of Amendment and fee are	submitted for filing.
Please return all correspondence concerning this n	natter to the following:
ADELFO ROQUE	
	Name of Contact Person
CAPITAL ACCOUNTS, I	NC.
	Firm/ Company
PO BOX 527803	
	Address
MIAMI, FL 33152-7803	
	City/ State and Zip Code
AROQUE@CAPITALACCOU	NTS.NET
· -	used for future annual report notification)
<u> </u>	
For further information concerning this matter, ple	ease call:
ADELFO ROQUE	at (305 482-9616
Name of Contact Person	Area Code & Daytime Telephone Number
Enclosed is a check for the following amount made	de payable to the Florida Department of State:
\$35 Filing Fee & Certificate of Status	
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

Articles of Amendment to Articles of Incorporation of

STORE 17, INC	
(Name of Corpor	ation as currently filed with the Florida Dept. of State)
P14000035091	
(Doc	cument Number of Corporation (if known)
Pursuant to the provisions of section 607.1006, Florits Articles of Incorporation:	rida Statutes, this Florida Profit Corporation adopts the following amendment(s) to
A. If amending name, enter the new name of the	corporation:
	The new
name must be distinguishable and contain the w "Corp.," "Inc.," or Co.," or the designation "Coword "chartered," "professional association," or t	word "corporation," "company," or "incorporated" or the abbreviation orp," "Inc," or "Co". A professional corporation name must contain the
B. Enter new principal office address, if applica	
(Principal office address <u>MUST BE A STREET A</u>	DDRESS)
C. Enter new mailing address, if applicable:	
(Mailing address MAY BE A POST OFFICE)	<u> </u>
D. 16	stand office address in Florida, autom the name of the
new registered agent and/or the new register	stered office address in Florida, enter the name of the
Name of New Registered Agent	
	(Florida street address)
	(1 TOTIAL STEEL MAINESS)
New Registered Office Address:	, Florida
	(=,, ==,,
New Registered Agent's Signature, if changing I	
I hereby accept the appointment as registered agen	nt. I am familiar with and accept the obligations of 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 <math>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)	Title	<u>Name</u>	<u>Addres</u> s
1) Change	P	JULIO S RODRIGUEZ	18400 NW 75 PL STE 117
Add			HIALEAH, FL 33015
X Remove			
2) Change			
Add			
Remove			
3) Change			
Add			
Remove	,		
4) Change			
Add			
Remove			
5) Change			
Add			,
Remove			
6) Change			
Add			
Remove			

Attach <i>additio</i>	or adding additional onal sheets, if necessa	ry). (Be specif	ic)			
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C 1	4 11 . 6					
<u>provisions fo</u>	ent provides for an r implementing the	amendment if no	ssification, or can ot contained in th	<u>cellation of issu</u> e amendment it	<u>ed snares,</u> self:	
(if not ap	plicable, indicate N/2	A)				
					<u> </u>	
			<u> </u>			
					<u>. </u>	
				-		
						

	. JUNE 12, 2017	
The date of each amendment(s) date this document was signed.	adoption:	, if other than the
Effective date if applicable:		
	(no more than 90 days after amendment file date)	
Note: If the date inserted in this document's effective date on the I	block does not meet the applicable statutory filing requirements, this date widepartment of State's records.	ll not be listed as the
Adoption of Amendment(s)	(<u>CHECK ONE</u>)	
☐ The amendment(s) was/were a by the shareholders was/were	dopted by the shareholders. The number of votes cast for the amendment(s) sufficient for approval.	
☐ The amendment(s) was/were a must be separately provided f	pproved by the shareholders through voting groups. The following statement or each voting group entitled to vote separately on the amendment(s):	
"The number of votes ca	st for the amendment(s) was/were sufficient for approval	
by	(voting group)	
	(voting group)	
☐ The amendment(s) was/were a action was not required.	dopted by the board of directors without shareholder action and shareholder	
The amendment(s) was/were a action was not required.	dopted by the incorporators without shareholder action and shareholder	
JUNE 12 Dated	, 2017	
Signatur	Servin)	
(By a selec	director, president or other officer – if directors or officers have not been sed, by an incorporator – if in the hands of a receiver, trustee, or other court inted fiduciary by that fiduciary)	_
	JESUS SANCHEZ	
	(Typed or printed name of person signing)	
	PRPESIDENT	
	(Title of person signing)	