

PI4000040902

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

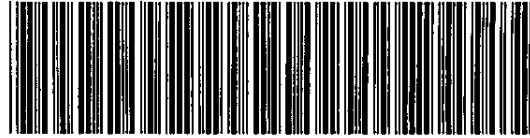
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

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200271805282

Amend

04/20/15--01017--023 **35.00

FILED
2015 MAY -8 PM 2:37
DEPARTMENT OF STATE
TALLAHASSEE, FLORIDA

DR
**00789, 00524, 00671 5/11/15*

COVER LETTER

TO: Amendment Section
Division of Corporations

NAME OF CORPORATION: JFE PRODUCTIONS CORP

DOCUMENT NUMBER: P14000040902

The enclosed *Articles of Amendment* and fee are submitted for filing.

Please return all correspondence concerning this matter to the following:

FABIOLA ROJAS

Name of Contact Person

JFE PRODUCTIONS CORP

Firm/ Company

35 WEST 61 ST

Address

HIALEAH FLORIDA 33012

City/ State and Zip Code

FERNANDEZSERVICESCOMP@HOTMAIL.COM

E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

FABIOLA ROJAS

Name of Contact Person

at (786) 312-6401

Area Code & Daytime Telephone Number

Enclosed is a check for the following amount made payable to the Florida Department 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)

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



FLORIDA DEPARTMENT OF STATE
Division of Corporations

April 27, 2015

Fabiola Rojas
JFE Productions Corp
35 West 61 St.
Hialeah, FL 33012

SUBJECT: JFE PRODUCTIONS CORP
Ref. Number: P14000040902

We have received your document for JFE PRODUCTIONS CORP and your check(s) totaling \$35.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

Please sign the amendment form as the new registered agent on page one of the amendment form and as the president on page 4 in the space provided at the bottom of the page.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6050.

Annette Ramsey
Regulatory Specialist II

Letter Number: 815A00008517

Articles of Amendment
to
Articles of Incorporation
of

FILED

2015 MAY -8 PM 2:37

JFE PRODUCTIONS CORP

(Name of Corporation as currently filed with the Florida Dept. of State)

P14000040902

(Document Number of Corporation (if known))

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

Pursuant to the provisions of section 607.1006, Florida Statutes, this *Florida Profit Corporation* adopts the following amendment(s) to its Articles of Incorporation:

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

N/A

The new

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."

B. Enter new principal office address, if applicable:

(Principal office address MUST BE A STREET ADDRESS)

5261 NW 170 TERRACE

MIAMI GARDENS FL 33012

C. Enter new mailing address, if applicable:

(Mailing address MAY BE A POST OFFICE BOX)

5261 NW 170 TERRACE

MIAMI GARDENS FL 33012

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

Name of New Registered Agent

FABIOLA ROJAS

35 WEST 61 ST

(Florida street address)

New Registered Office Address:

HIALEAH

(City)

Florida

33012

(Zip Code)

New Registered Agent's Signature, if changing Registered Agent:

I hereby accept the appointment as registered agent. *Am familiar with and accept the obligations of the position.*

X 

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 PT John Doe

X Remove V Mike Jones

X Add SV Sally Smith

Type of Action (Check One)	Title	Name	Address
1) <input type="checkbox"/> Change	<u>P</u>	<u>FABIOLA ROJAS</u>	<u>35 WEST 61 ST</u>
<input checked="" type="checkbox"/> Add			<u>HIALEAH FL 33012</u>
<input type="checkbox"/> Remove			
2) <input type="checkbox"/> Change	<u>VP</u>	<u>JORGE A FERNANDEZ</u>	<u>35 WEST 61 ST</u>
<input checked="" type="checkbox"/> Add			<u>HIALEAH FL 33012</u>
<input type="checkbox"/> Remove			
3) <input type="checkbox"/> Change	<u>VP</u>	<u>ELSY G ESPIRITTO</u>	<u>5261 NW 170 TERRACE</u>
<input checked="" type="checkbox"/> Add			<u>MIAMI GARDENS FL 33012</u>
<input type="checkbox"/> Remove			
4) <input type="checkbox"/> Change			
<input type="checkbox"/> Add			
<input type="checkbox"/> Remove			
5) <input type="checkbox"/> Change			
<input type="checkbox"/> Add			
<input type="checkbox"/> Remove			
6) <input type="checkbox"/> Change			
<input type="checkbox"/> Add			
<input type="checkbox"/> Remove			

E. If amending or adding additional Articles, enter change(s) here:

(Attach additional sheets, if necessary). (Be specific)

N/A

F. If an amendment provides for an exchange, reclassification, or cancellation of issued shares, provisions for implementing the amendment if not contained in the amendment itself:

(if not applicable, indicate N/A)

N/A

The date of each amendment(s) adoption: 04/11/2015, if other than the date this document was signed.

Effective date if applicable: 04/11/2015
(no more than 90 days after amendment file date)

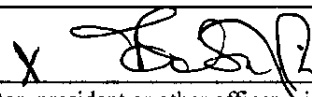
Adoption of Amendment(s) (CHECK ONE)

- ☒ 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 04/11/2015

Signature X 
(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)

FABIOLA ROJAS

(Typed or printed name of person signing)

PRESIDENT

(Title of person signing)