Division of Carporas Florida Department of State

Division of Corporations Electronic Filing Cover Sheet

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To:

Division of Corporations

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Account Name : AJ ACCOUNTING SERVICES, IN

Account Number: I20110000092 Phone : (305)448-9584

Fax Number : (305)448-9569

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

Email Address:

COR AMND/RESTATE/CORRECT OR O/D RESIGN 24/7 PROPANE, INC.

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Electronic Filing Menu

Corporate Filing Menu

Help

COVER LETTER

Division of Corporations				
NAME OF CORPORATION: 24/7 PROPANE, INC.				
DOCUMENT NUM	DOCUMENT NUMBER: P14000042585			
	of Amendment and fcc are sub			
Please return all corre	spondence concerning this mat	ter to the following:		
	ABDUL RAZZAK	KHANANI		
		Name of Contact Person		
	24/7 PROPANE,			
	400E NIN 440TH	Firm/ Company		
	1005 NW 119TH ST			
	Address			
	NORTH MIAMI, FL 33168 City/ State and Zip Code			
	E-mail address: (to be used for future annual report notification)			
	·			
For further information concerning this matter, please call:				
ABDUL RAZ	ZAK KHANANI	at (786	290-3000	
Name	of Contact Person	Arca Co	de & Daytime Telephone Number	
Enclosed is a check for the following amount made payable to the Florida Department of State:				
■ \$35 Filing Fee	Certificate of Status	Certified Copy (Additional copy is enclosed)	☐\$52.50 Filing Fee Certificate of Status Certified Copy (Additional Copy is enclosed)	
An Di P.C	niling Address nendment Section vision of Corporations D. Box 6327 Ilahassec, FL 32314	Amend Divisio Clifton 2661 E	Address Iment Section on of Corporations Building Executive Center Circle assee, FL 32301	

TO: Amendment Section

Articles of Amendment Articles of Incorporation of

FILED.

284 SEP -5 AM 8: 29

24/7 PROPANE, INC.

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

(Document Number of Corporation (if known)

P14000042585

JALLAHASSEE FLORIDA

endment(s) to

comparation " "com	nomi " or "Incorner	mud" or the abb
carporation, comp Inc." or "Co". A p reviation "P.A."	rof e ssional corporat	ion name must co
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office address in Flo	orida, enter the nam	e of the
ce address:		
<u> </u>		
(Florida street address	s)	
	, Florida_	
(City)		(Zip Code)
(City)	, Florida_	
	office address in Floice address:	office address in Florida, enter the namice address: (Florida street address)

Page 3 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:

(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.

X Change	PT lo	hn Doc	
X Remove	<u>v</u> <u>M</u>	ike Jones	
_X Add	<u>sv</u> <u>S</u> e	ully Smith	
Type of Action (Check One)	<u>Title</u>	Name	<u>Addres</u> s
1) Change	VP	ABDUL RAZZAK KHANANI	1005 NW 119TH ST
Add			NORTH MIAMI, FL 33168
Remove			
2) Change			
Add			
П_ Реточе			
3) Change			
Add		1	
Remove			
4) Change			
Add		. :	
Remove		i :	
5) Change	<u></u>		
Add		;	
Remove			
6) Change			
Add			
Remove			

Page 2 of 4

mending or adding additional Ar ach additional sheets, if necessary).	(Be specific)	
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n amendment provides for an exc	hange reclassification, or cancellation	n of issued shares.
ovisions for implementing the am (if not applicable, indicate N/A)	endment if not contained in the amer	dment itself:
(if not applicable, maicale N/A)	•	
	·	
	;	

Page 3 of 4

The date of each amendment(s) ad	option: 09/02/2014	, 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 suf	oted by the shareholders. The number of votes cast for the amendment(s) ficient for approval.	
	each voting group entitled to vote separately on the amendment(s):	
"The number of votes east f	or the amendment(s) was/were sufficient for approval	
by	,,	
	(voting group)	
The amendment(s) was/wcre adopaction was not required.	oted by the board of directors without shareholder action and shareholder	
The amendment(s) was/were adopted action was not required,	nted by the incorporators without sharcholder action and shareholder	
Dated 09/05/20	14	
Signature O	shellow t	
selected	rector, president or other ficer — 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)	
•	ABDUL RAZZAK KHANANI	
-	(Typed or printed name of person signing)	
,	V. PRESIDENT	
_	(Title of person signing)	

Page 4 of 4