

P14000055577

Florida Department of State
Division of Corporations
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To: Division of Corporations
Fax Number : (850)617-6380

From: Account Name : MONAHAN MIJARES CPA PA
Account Number : 120050000157
Phone : (305)407-1438
Fax Number : (305)397-1003

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

Email Address: _____

**COR AMND/RESTATE/CORRECT OR O/D RESIGN
NELCAP ENTERPRISES INC**

Certificate of Status	0
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Page Count	06
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C. CARROTHERS

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AUG 01 2016

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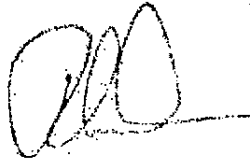
2016 JUL 29 AM 7:55
SECRETARY OF STATE
TALLAHASSEE FLORIDA

RECEIVED
16 JUL 29 AM 9:54

WRITTEN ACCEPTANCE LETTER BY REGISTERED AGENT

I hereby accept the appointment as registered agent for NELCAP ENTERPRISES INC. (Document Number P14000055577) and agree to act in this capacity. I further agree to comply with the provisions of all statutes relative to the proper and complete performance of my duties, and I am familiar with and accept the obligations of my position as registered agent as provided for in Chapter 605, F.S. Or, if this document is being filed to merely reflect a change in the registered office address, I hereby confirm that the limited liability company has been notified in writing of this change.

Dated July, 2016



Roark R Monahan, CPA
Registered Agent

COVER LETTER

TO: Amendment Section
Division of Corporations

NAME OF CORPORATION: NELCAP ENTERPRISES INC

DOCUMENT NUMBER: P14000055577

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

Please return all correspondence concerning this matter to the following:

Roark R. Monahan

Name of Contact Person

Monahan-Mijares CPA, PA

Firm/ Company

75 Valencia Av, Suite 703

Address

Coral Gables, FL 33134

City/ State and Zip Code

elismor.castillo@monahanmijares.com

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

For further information concerning this matter, please call:

Roark R. Monahan

Name of Contact Person

at (305)

407-1440

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 6127
Tallahassee, FL 32314

Street Address
Amendment Section
Division of Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, FL 32301

Articles of Amendment
to
Articles of Incorporation
of

NELCAP ENTERPRISES INC

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

P14000055577

(Document Number of Corporation (if known))

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)

N/A

C. Enter new mailing address, if applicable:(Mailing address MAY BE A POST OFFICE BOX)

N/A

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

Roark R. Monahan

75 Valencia Av, Suite 703

(Florida street address)

New Registered Office Address:

Coral Gables

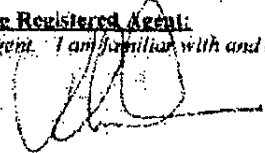
(City)

Florida 33134

(Zip Code)

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

I hereby accept the appointment as registered agent. 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 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:

☒ Change PT John Doe

☒ Remove V Mike Jones

☒ Add SV Sally Smith

Type of Action (Check One)	Title	Name	Address
1) ☐ Change ☒ Add ☐ Remove	P	ELEONORA ANGULO	251 GALEN DRIVE # 206E KEY BISCAYNE, FL 33149
2) ☐ Change ☒ Add ☐ Remove	VP	NILSE CAPRILES	251 GALEN DRIVE # 206E KEY BISCAYNE, FL 33149
3) ☒ Change ☐ Add ☐ Remove	TS	DANIELLA ANGULO- BENATUI	251 GALEN DRIVE # 206E KEY BISCAYNE, FL 33149
4) ☐ Change ☐ Add ☐ Remove			
5) ☐ Change ☐ Add ☐ Remove			
6) ☐ Change ☐ Add ☐ Remove			

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

(Attach additional sheet(s), 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: _____, if other than the date this document was signed.

Effective date if applicable: _____
(no more than 90 days after amendment file date)

Note: If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as the document's effective date on the Department of State's records.

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 JULY 29, 2016

Signature _____

(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).

ELBONORA ANGULO

(Typed or printed name of person signing)

PRESIDENT

(Title of person signing)