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## **COVER LETTER**

TO: Amendment Section

P.O. Box 6327

Tallahassee, FL 32314

**Division of Corporations** NAME OF CORPORATION: **DOCUMENT NUMBER:** The enclosed Articles of Amendment and fee are submitted for filing. Please return all correspondence concerning this matter to the following: Name of Contact Person Firm/ Company Address City/ State and Zip Code E-mail address: (to be used for future annual report notification) For further information concerning this matter, please call: Name of Contact Person 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 & □\$43.75 Filing Fee & □\$52.50 Filing Fee Certificate of Status Certified Copy Certificate of Status (Additional copy is Certified Copy enclosed) (Additional Copy is enclosed) Mailing Address Street Address Amendment Section Amendment Section Division of Corporations **Division of Corporations** 

Clifton Building

2661 Executive Center Circle Tallahassee, FL 32301

## **Articles of Amendment**

	to Articles of Incorporation	
$\Omega < \tau \Omega$	of	
(Name of Corpor	ration as currently filed with the Florid	da Dept. of State)
PIYMO	062350	·
(Doc	cument Number of Corporation (if know	n)
Pursuant to the provisions of section 607.1006, Florits Articles of Incorporation:	rida Statutes, this Florida Profit Corpor	ation adopts the following amendment(s) to
A. If amending name, enter the new name of the	e corporation:	•
name must be distinguishable and contain the was "Corp.," "Inc.," or Co.," or the designation "Coword "chartered," "professional association," or the second contains of the c	orp," "Inc," or "Co". A professional the abbreviation "P.A."	The new incorporated" or the abbreviation corporation name must contain the
B. Enter new principal office address, if applica (Principal office address MUST BE A STREET A	<u>DDRESS</u> )	
· ·		
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE)	<i>BOX</i> )	والي الم
in the second	-14	
D. If amending the registered agent and/or regis	stered office address in Florida, enter	the name of the
new registered agent and/or the new register	ed office address:	E 116 376
Name of New Registered Agent	- Assipting	27
	(Florida street address)	
V D	(Pitoriaa sireei auuress)	
New Registered Office Address:	(City)	, Florida
	•	
New Registered Agent's Signature, if changing F I hereby accept the appointment as registered agen	Registered Agent: at. I am familiar with and accept the obt	ligations of the position.
Si	ignature of New Registered Agent, if cha	inging

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> <u>John</u>	n Doc	•
X Remove	V Mike	e Jones	
X Add	<u>SV</u> <u>Sally</u>	/ Smith	
Type of Action (Check One)	Title	Name	<u>Addres</u> s
1) Change	VP	Nelson D. Herrera	2275 Linton Ridge Circle
X Add			Delray Beach
Remove			ह्ट उँउपपप.
2) Change	VP	Jorge A. Jimenez	2798 E. Atlantic Blud.
Add		9	Pompano Beach
Remove			FL 33062.
3) Change	<u>S</u>	Jorge A. Jimenez	2798 F. Atlantic Blud
X Add		_	Pompano Beach
Remove			FL 33062.
4) Change			
Add			
Remove			
5) Change			
Add			
Remove			
6) Change			
Add			
Remove			

f amending or adding additional Arti Attach additional sheets, if necessary)	(Be specific)
	·
,	
	· · · · · · · · · · · · · · · · · · ·
an amendment provides for an exch	nange, reclassification, or cancellation of issued shares, and ment if not contained in the amendment itself:
orovisions for implementing the amer (if not applicable, indicate N/A)	ndment if not contained in the amendment itself:

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)	
<b>Note:</b> If the date inserted in this block does not meet the applicable statutory filing requirements, this date will a document's effective date on the Department of State's records.	not be listed as the
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.	•
Signature	_
selected, by an incorporator—if in the hands of a receiver, trustee, or other court appointed fiduciary by that fiduciary)	
Johanna Jimenez	
(Typed or printed name of person signing)	
Prosident	·
(Title of person signing)	