## P140000 75426

(Re	questor's Name)			
(Ad	dress)			
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(City/State/Zip/Phone #)				
PICK-UP	☐ WAIT	MAIL		
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(Do	ocument Number)			
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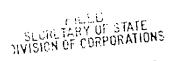
C. Lew; 5 14

## **COVER LETTER**

**TO:** Amendment Section Division of Corporations

NAME OF CORPORA	TION: ONYX GLO	BAL BUSINESS S	OLUTIONS CORP		
DOCUMENT NUMBE	<sub>R:</sub> P1400007542	26			
The enclosed Articles of	Amendment and fee are su	bmitted for filing.			
Please return all correspo	ondence concerning this ma	tter to the following:			
	MIR	IIAM C CARRAZ	ZAN		
_		Name of Contact Person	1		
	MIRIAMS FILING SERVICES CORP				
_	Firm/ Company				
	5405 NW 102 AVE SUITE 243				
	Address				
	SUNRISE FLORIDA 33351				
		City/ State and Zip Cod	e		
	miriamfili	ingserv@bellsou	ıth.net		
		sed for future annual report			
Dan Gardhan in Canadian		. 11			
For further information (	oncerning this matter, pleas	se cair:	•		
MIRIAM	C CARRAZAN	at (954	, 548-5252		
Name of	Contact Person	Area Co	de & Daytime Telephone Number		
Enclosed is a check for t	he following amount made	payable to the Florida Depa	artment 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		Street Address			
Amendment Section Division of Corporations		Amendment Section			
	ox 6327	Division of Corporations Clifton Building			
Tallahassee, FL 32314 Chron Building 2661 Executive Center Circle					
Tallahassee, FL 32301					

## **Articles of Amendment** to Articles of Incorporation



14 HOV 10 AM 9: 56

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

## ONYX GLOBAL BUSINESS SOLUTIONS CORP



(Document Number of Corporation (if known)

endment(s) to

ame must be distinguishable and con Corp.," "Inc.," or Co.," or the design ord "chartered," "professional associa	nation "Corp." "Inc," or	"Co". A profession	
. Enter new principal office address,	if applicable:		
Principal office address <u>MUST BE A S</u>	TREET ADDRESS )	791 RANCH RD	
		FT LAUDE	ERDALE FL 33326
Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)		791 RANCH RD	
		FT LAUDERDALE FL 33326	
If a manding the majetund exact or			
new registered agent and/or the new		ldress in Florida, ent	ter the name of the
	w registered office addre	Idress in Florida, ent ess: RIGUEZ ROM	ter the name of the
new registered agent and/or the new	JUAN C RODF 791 RANCH R	Idress in Florida, ent ess: RIGUEZ ROM	ter the name of the
_	JUAN C RODF 791 RANCH R	Idress in Florida, entess: RIGUEZ ROM RD street address)	ter the name of the

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	 <u>sv</u>	Sally Smith	
Type of Action (Check One)	<u>Title</u>	Name	<u>Addres</u> s
1) Change	Р	Juan C Rodriguez Romero	791 RANCH RD
Add			FT Lauderdale FI 33326
Remove			
2) Change	VP	NELSON A. MORALES	14313 SW 101 LANE
Add			MIAMI FL 33186
Remove			
3) Change	Р	PABLO SANTOS	801 BRICKELL AVENUE
Add			SUITE 2907
Remove			MIAMI FL 33131
4) Change	<del></del>		
Add			<u> </u>
Remove			
5) Change			
Add			
Remove			
6) Change	was the same of th		
Add			
Remove			

Attach additional sheets, if necessary).	icles, enter change(s) here: (Be specific)
, <u></u>	
an amendment provides for an exch	hange, reclassification, or cancellation of issued shares, endment if not contained in the amendment itself:
(if not applicable indicate N/A)	noment is not contained in the amendment usen:
(if not applicable, indicate N/A)	noticent in not contained in the amendment usen.
(if not applicable, indicate N/A)	notaent ii not contained in the amendment usen.
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(if not applicable, indicate N/A)	noticent in not contained in the amendment users.

SECRETARY OF STATE DIVISION OF CORPORATIONS

The date of each amendment(s) adoption	on: NOVEMBER 05 2014	BIAISIAN OF CO	if other than the	
date this document was signed.		14 HOV 10	AH 9:	if other than the
Effective date if applicable:				
	(no more than 90 days after amendment	file date)		
Adoption of Amendment(s)	(CHECK ONE)			
The amendment(s) was/were adopted by the shareholders was/were sufficie	by the shareholders. The number of votes cast fo nt for approval.	r the amendment(s	)	
	d by the shareholders through voting groups. The voting group entitled to vote separately on the an		nt	
	e amendment(s) was/were sufficient for approval			
by		"		
	(voting group)			
The amendment(s) was/were adopted action was not required.	by the board of directors without shareholder acti	on and shareholde	r	
The amendment(s) was/were adopted action was not required.	by the incorporators without shareholder action a	nd shareholder		
Dated_11/05/2014				
Signature	MIN)			
(By a director selected, by a	or, president or other officer – if directors or office an incorporator – if in the hands of a receiver, truduciary by that fiduciary)	ers have not been stee, or other court	:	
	JUAN C RODRIGUEZ RO	MERO		
	(Typed or printed name of person si	gning)		
	PRESIDENT			
<del></del>	(Title of person signing)			