

P1400082216

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

PICK-UP

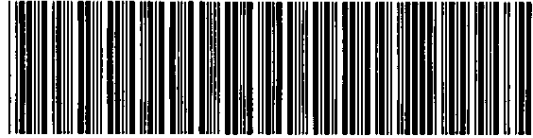
WAIT

MAIL

(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____



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11/04/14--01014--010 **35.00

Special Instructions to Filing Officer:
R/A cannot sign as
OID

Office Use Only

STATE OF FLORIDA
TALLAHASSEE, FLORIDA

14 DEC -9 PM 4:45

FILED

And

DEC 11 2014

R. WHITE



FLORIDA DEPARTMENT OF STATE
Division of Corporations

November 17, 2014

SEVERINE GIANESE-PITTMAN
100 ALMERIA AVE, STE 340
CORAL GABLES, FL 33134

SUBJECT: NEWGOTIATION SOLUTIONS INC
Ref. Number: P14000082216

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

An officer/director must sign accepting the adoption of amendment. A registered agent is not authorized to sign.

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.

Rebekah White
Regulatory Specialist II

Letter Number: 514A00024350



FLORIDA DEPARTMENT OF STATE
Division of Corporations

November 4, 2014

SEVERINE GIANESE-PITTMAN
100 ALMERIA AVE
STE. 340
CORAL GABLES, FL 33134

SUBJECT: NEWGOTIATION SOLUTIONS INC
Ref. Number: P14000082216

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

If the corporation is a **PROFIT** corporation it must be signed 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.

If the corporation is a **NOT FOR PROFIT** corporation it must be signed by the chairman or vice chairman of the board, president or other officer - if directors have not been selected, by an incorporator - if in the hands of a receiver, trustee, or other court appointed fiduciary, by that fiduciary.

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.

Irene Albritton
Regulatory Specialist II 3 .

Letter Number: 214A00023584

COVER LETTER

TO: Amendment Section
Division of Corporations

NAME OF CORPORATION: NEWGOTIATION SOLUTIONS INC

DOCUMENT NUMBER: P14000082216

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

Please return all correspondence concerning this matter to the following:

SEVERINE GIANESE-PITTMAN

Name of Contact Person

Firm/ Company

100 ALMERIA AVE, SUITE 340

Address

CORAL GABLES, FL 33134

City/ State and Zip Code

SGIANESE@GMAIL.COM

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

For further information concerning this matter, please call:

SEVERINE GIANESE-PITTMAN at (**786**) **5476919**

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:

- | | | | |
|---|--|---|--|
| <input checked="" type="checkbox"/> \$35 Filing Fee | <input type="checkbox"/> \$43.75 Filing Fee &
Certificate of Status | <input type="checkbox"/> \$43.75 Filing Fee &
Certified Copy
(Additional copy is
enclosed) | <input type="checkbox"/> \$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

Articles of Amendment
to
Articles of Incorporation
of

FILED
14 DEC -9 PM 4:45

NEWGOTIATION SOLUTIONS INC

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

P14000082216

(Document Number of Corporation (if known))

STATE OF FLORIDA
SECRETARY OF STATE

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:

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)**

100 ALMERIA AVE

CORAL GABLES

FL, 33134

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

100 ALMERIA AVE

CORAL GABLES

FL, 33134

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

GIANESE-PITTMAN, SEVERINE

100 ALMERIA AVE, SUITE 340

(Florida street address)

New Registered Office Address:

CORAL GABLES

Florida 33134

(City)

(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) <input type="checkbox"/> Change <input type="checkbox"/> Add <input checked="" type="checkbox"/> Remove	<u>MGR</u>	<u>SALEM, JEROME</u>	<u>1001 BRICKELL BAY</u> <u>DRIVE 9TH FLOOR</u> <u>MIAMI, FL 33131</u>
2) <input type="checkbox"/> Change <input type="checkbox"/> Add <input checked="" type="checkbox"/> Remove	<u>MGR</u>	<u>DUZERT, YANN</u>	<u>1001 BRICKELL BAY</u> <u>DRIVE 9TH FLOOR</u> <u>MIAMI, FL 33131</u>
3) <input type="checkbox"/> Change <input checked="" type="checkbox"/> Add <input type="checkbox"/> Remove	<u>MGR</u>	<u>DUZERT & SALEM ASSOC</u> <u>DUZERT & SALEM Associates INC</u>	<u>100 ALMERIA AVE</u> <u>CORAL GABLES</u> <u>FL, 33134</u>
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	_____	_____	_____

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)

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 11/24/2014

Signature DUZERT AND SALEM ASSOCIATES INC
(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)

JEROME SALEM
(Typed or printed name of person signing)

DIRECTOR
(Title of person signing)

