

P14000086771

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

(Business Entity Name)

(Document Number)

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08/30/16--01006--001 **35.00

FILED
16 OCT 14 AM 10:25
CLERK OF COURT
TOLSON

Amend/ name change

OCT 28 2016

D CUSHING

COVER LETTER

TO: Amendment Section
Division of Corporations

NAME OF CORPORATION: ALL GF SERVICES CORPORATION

DOCUMENT NUMBER: P14000086771

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

Please return all correspondence concerning this matter to the following:

MICHELLY PASSOS

Name of Contact Person

CAMPANA GROUPS INC

Firm/ Company

1761 W. HILLSBORO BLVD SUITE 324

Address

DEERFIELD BEACH, FL 33442

City/ State and Zip Code

MICHELLY@CAMPANAGROUPS.COM

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

For further information concerning this matter, please call:

MICHELLY PASSOS

at (954)

228-0706

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 &
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 6327
Tallahassee, FL 32314

Street Address

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

SECRETARY
TALLAHASSEE
16 OCT 14 AM 10:28



FLORIDA DEPARTMENT OF STATE
Division of Corporations

September 13, 2016

MICHELLY PASSOS
CAMPANA GROUPS INC
1761 W HILLSBORO BLVD SUITE 324
DEERFIELD BEACH, FL 33442

SUBJECT: ALL GF SERVICES CORPORATION
Ref. Number: P14000086771

We have received your document for ALL GF SERVICES CORPORATION and your check(s) totaling \$35.00. However, the document has not been filed and is being retained in this office for the following:

The name designated in your document is unavailable since it is the same as, or it is not distinguishable from the name of an administratively dissolved/revoked entity. Names of administratively dissolved/revoked entities are not available for one year from the date of administrative dissolution/revocation unless the dissolved/revoked entity provides the Department of State with an affidavit or letter stating that they have no intention of reinstating, therefore, releasing the name for use to another entity.

The name will become available at midnight on 09/25/16 and will be able to be filed on the 26th. If you want to wait and have it filed on the 26th you can either call me or email me.

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.

Diane Cushing
Senior Section Administrator

Letter Number: 216A00019417

VED
16 OCT 11 AM 10:30
DIVISION OF STATE
CORPORATIONS
FLORIDA

RECEIVED
16 OCT 14 AM 10:31
DIVISION OF STATE
CORPORATIONS
TALLAHASSEE, FLORIDA

www.sunbiz.org

Division of Corporations - P.O. BOX 6327 Tallahassee, Florida 32314

Articles of Amendment
to
Articles of Incorporation
of

ALL GF SERVICES CORPORATION

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

P14000086771

(Document Number of Corporation (if known))

FILED
SECRETARY
16 OCT 14
F11
AM 10:28

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:

E-Server 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)

C. Enter new mailing address, if applicable:

(Mailing address MAY BE A POST OFFICE BOX)

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 _____

(Florida street address)

New Registered Office Address: _____

(City)

_____, Florida

(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	<u>P</u>	<u>FABIO F DE LIMA</u>	<u>32563 SW 66TH AVE # 411</u>
<input type="checkbox"/> Add			<u>BOCA RATON, FL 33428</u>
<input checked="" type="checkbox"/> Remove			
2) <input type="checkbox"/> Change	<u>P</u>	<u>GUSTAVO CARRASCO</u>	<u>4394 NW 9TH AVE BLD 21 2C</u>
<input checked="" type="checkbox"/> Add			<u>BOX 343</u>
<input type="checkbox"/> Remove			<u>POMPANO BEACH, FL 33064</u>
3) <input type="checkbox"/> Change	<u>VP</u>	<u>SANDRA CARRASCO</u>	<u>4394 NW 9TH AVE BLD 21 2C</u>
<input checked="" type="checkbox"/> Add			<u>BOX 343</u>
<input type="checkbox"/> Remove			<u>POMPANO BEACH, FL 33064</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			

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

(Attach additional sheets, if necessary). (Be specific)

[illegible]

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)

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.

08/19/2016
Dated _____

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)

FABIO F DE LIMA

(Typed or printed name of person signing)

PRESIDENT

(Title of person signing)