

**Florida Department of State**  
Division of Corporations  
Electronic Filing Cover Sheet

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((H16000021163 3)))



H160000211633ABCU

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

From: Account Name : KRISJOENNA SERVICES, INC.  
Account Number : I20080000033  
Phone : (305)644-3055  
Fax Number : (305)644-3052

**\*\*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**  
**IMPORTACIONES A & H CORP**

Certificate of Status	0
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Estimated Charge	\$35.00

Electronic Filing Menu

Corporate Filing Menu

Help

FEB 01 2016  
C. CARROTHERS

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

2016 JAN 29 AM 4:26

FILED

January 27, 2016

FLORIDA DEPARTMENT OF STATE  
Division of Corporations

IMPORTACIONES A & H CORP  
11201 NW 89TH STREET  
APT 218  
DORAL, FL 33178058

SUBJECT: IMPORTACIONES A & H CORP  
REF: P15000018566

We received your electronically transmitted document. However, the document has not been filed. Please make the following corrections and refile the complete document, including the electronic filing cover sheet.

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 document number of the name conflict is L00000014931.

If you have any questions concerning the filing of your document, please call (850) 245-6050.

Cathy A Carrothers  
Regulatory Specialist

FAX And E: H16000021163  
Letter Number: 916200001728

RECEIVED

16 JAN 29 AM 8:53

P.O. BOX 6372 Tallahassee, Florida 32316

**COVER LETTER**

TO: Amendment Section  
Division of Corporations

NAME OF CORPORATION: IMPORTACIONES A & H CORP

DOCUMENT NUMBER: P15000016566

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

Please return all correspondence concerning this matter to the following:

LUIS A PALLARES

Name of Contact Person

IMPORTACIONES A & H CORP

Firm/ Company

2268 SALERNO CR SAN MESINA

Address

WESTON FL 33327

City/ State and Zip Code

djusto2012@live.com

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

For further information concerning this matter, please call:

LUIS A PALLARES

at ( 305 )

7942348

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

Articles of Amendment  
to  
Articles of Incorporation  
of

IMPORTACIONES A &amp; H CORP

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

PI5000016566

(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:**

ALONZY EXPORT IMPORT CORP

*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)

2268 SALERNO CR SAN MESINA

WESTON FL 33327

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

2268 SALERNO CR SAN MESINA

WESTON FL 33327

**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 JESUS ALONZO

2268 SALERNO CR SAN MESINA

(Florida street address)

New Registered Office Address: WESTON

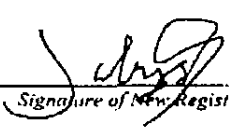
(City)

Florida 33327

(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:

X Change PT John Doe  
 X Remove V Mike Jones  
 X 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	D	HAROLD MATOS	11201 NW 89TH STREET APT 218 DORAL FL 33178
2) <input type="checkbox"/> Change <input checked="" type="checkbox"/> Add <input type="checkbox"/> Remove	D	STEFFANY M ALONSO LASTRA	2268 SALERNO CR SAN MESIN, WESTON FL 33327
3) <input type="checkbox"/> Change <input type="checkbox"/> Add <input type="checkbox"/> Remove			
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			

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

N/A

[illegible]

(if not applicable, indicate N/A)

N/A

[illegible]

The date of each amendment(s) adoption: 01/25/2016, if other than the date this document was signed.

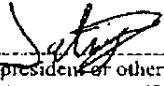
Effective date if applicable: 01/25/2016  
(no more than 90 days after amendment file date)

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.

01/25/2016  
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)

JESUS ALONZO

\_\_\_\_\_  
(Typed or printed name of person signing)

PRESIDENT

\_\_\_\_\_  
(Title of person signing)