

04/10/2017 15:29

954-965-9492

ASAP ACCOUNTING

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Florida Department of State  
Division of Corporations  
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To:

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

From:

Account Name : ASAP ACCOUNTING & TAX CORPORATION  
Account Number : I20000000203  
Phone : (954) 965-9491  
Fax Number : (954) 965-9492

APR 11 2017

R. WHITE

**\*\*Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please.\*\***

**Email Address:** ASAPACCOUNTING@LIVE.COM

**COR AMND/RESTATE/CORRECT OR O/D RESIGN  
ORANGE WELLBEING SERVICES INC.**

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17 APR 10 PM 3:27

DEPARTMENT OF STATE  
DIVISION OF CORPORATIONS  
TALLAHASSEE, FLORIDA

17 APR 10 AM 8:31

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**COVER LETTER**

TO: Amendment Section  
Division of Corporations

NAME OF CORPORATION: ORANGE WELLBEING SERVICES INC.

DOCUMENT NUMBER: P15000041899

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

Please return all correspondence concerning this matter to the following:

JAIRO BOSCH

Name of Contact Person

ASAP ACCOUNTING & TAX CORPORATION

Firm/ Company

7179 PEMBROKE ROAD

Address

PEMBROKE PINES, FL 33023

City/ State and Zip Code

ASAPACCOUNTING@LIVE.COM

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

For further information concerning this matter, please call:

JAIRO BOSCH

Name of Contact Person

at ( 954 )

954-965-9491

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

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Articles of Amendment  
to  
Articles of Incorporation  
of

ORANGE WELLBEING SERVICES INC.

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

P15000041899

(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:**

N/A

*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**)

N/A

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

N/A

**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 N/A

(Florida street address)

New Registered Office Address: N/A, Florida  
(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

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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		N/A	N/A
<input type="checkbox"/> Add			
<input type="checkbox"/> Remove			
2) <input type="checkbox"/> Change			
<input type="checkbox"/> Add			
<input type="checkbox"/> Remove			
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			

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**E. If amending or adding additional Articles, enter change(s) here:***(Attach additional sheets, if necessary). (Be specific)***ARTICLE IV. Capital Stock:**

The number of shares of stock that this corporation is authorized to have outstandingly at anyone time is: 1000 shares of common stock having a \$1.00 par value per share. This corporation will not commence business until at least the \$1,000.00 have been received by it, as consideration for the issuance of shares.

**ARTICLE IX. Shareholders:**

The names, percentage of common stock shares, and street addresses of the shareholders to this corporation are:

ROSMARCA CORPORATION, (25%), 120 Lakeview Drive, Apt 109, Weston, FL 33326,

ABIROS CORP., (25%), 3900 SW 40th Avenue, West Park, FL 33023,

JUAN C. LOPEZ Sr., (50%), 13751 NW 4th Street, Apt 108, Pembroke Pines, FL 33028.

**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)*

N/A

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The date of each amendment(s) adoption: May 8th, 2015., if other than the date this document was signed.

Effective date if applicable: April 10th, 2017.  
(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

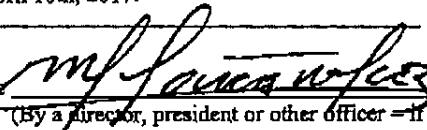
by \_\_\_\_\_  
(voting group)

☒ 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.

Dated April 10th, 2017.

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)

Moises P. Marciano

(Typed or printed name of person signing)

PRESIDENT

(Title of person signing)

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