

P15C00006SD61

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP ☐ WAIT ☐ MAIL

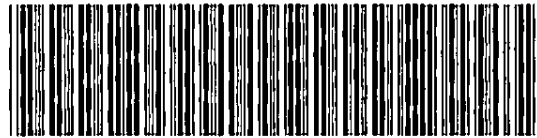
(Business Entity Name)

(Document Number)

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09/26/18--01024--024 \*\*35.00

FILED  
2018 OCT -4 AM 9:38  
SEC 7 2018 OCT 4 PM 1:00  
FBI - ALBANY

Amend

OCT 05 2018  
ALBRITTON

**COVER LETTER**

TO: Amendment Section  
Division of Corporations

NAME OF CORPORATION:

Olivia Marquez, INC

DOCUMENT NUMBER:

P15000068061

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

Please return all correspondence concerning this matter to the following:

Olivia Beskin

Name of Contact Person

Firm/ Company

455 NE 14 ST

Address

Boca Raton, FL 33432

City/ State and Zip Code

oliviamarie2010@hotmail.com

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

For further information concerning this matter, please call:

Olivia Beskin

Name of Contact Person

at 561, 703 2282

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



FLORIDA DEPARTMENT OF STATE  
Division of Corporations

September 27, 2018

OLIVIA BESKIN  
455 NE 14 ST  
BOCA RATON, FL 33432

SUBJECT: OLIVIA MARQUEZ INC  
Ref. Number: P15000068061

We have received your document for OLIVIA MARQUEZ 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):

The date of adoption of each amendment must be included in the document.

Please check the appropriate box on the amendment form regarding the adoption of the amendment(s).

The document must have original signatures.

The name and title of the person signing the document must be noted beneath or opposite the signature.

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

Letter Number: 018A00020186

Thank you! for your help  
the only change is my  
address, cause is a home  
business. I am the only  
owner  
Regards  
Olivia B.

www.sunbiz.org

Division of Corporations, P.O. BOX 6227, Tallahassee, Florida 32314

RECEIVED  
18 OCT -4 PM 1:05  
SECRETARY  
TALLAHASSEE

Articles of Amendment  
to  
Articles of Incorporation  
of

Olivia Marquez, INC

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

P15000068061

(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)

455 NE 14 STREET

Boca Raton, FL 33432

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

Same as above

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

455 NE 14 ST

(Florida street address)

New Registered Office Address:

Boca Raton

(City)

Florida

33432 ✓

(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

FILED  
2018 OCT -4 AM 9:30  
HALL COUNTY CLERK  
JANET L. HARRIS

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) ☒ Change      PT      Olivia Beskin  
☒ Add      My New Address  
☐ Remove

455 NE 14 ST, Boca Raton FL 33432

2) ☐ Change      \_\_\_\_\_  
☐ Add      Previous Address  
☒ Remove

3) ☐ Change      PT      Olivia Beskin  
☐ Add  
☐ Remove

12369 Military Tr, Deerfield Beach, FL 33442

4) ☐ Change      \_\_\_\_\_  
☐ Add  
☐ Remove

5) ☐ Change      \_\_\_\_\_  
☐ Add  
☐ Remove

6) ☐ Change      \_\_\_\_\_  
☐ Add  
☐ Remove

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

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

N/A

**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

The date of each amendment(s) adoption: Sep 19 / 2018 if other than the date this document was signed.

Effective date if applicable: Sep 19 / 2018  
(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 Sep 19 / 2018  
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)

Olivia Besken President/owner  
(Typed or printed name of person signing)

President  
(Title of person signing)