# P15 000073730

(Re	equestor's Name)	
(Ac	ldress)	_
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PICK-UP	☐ WAIT	MAIL MAIL
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Certified Copies	_ Certificates	s of Status
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Mason

#### **COVER LETTER**

TO: Amendment Section
Division of Corporations

NAME OF CORPO	RATION: MR. AL TAX ANI	O IMMIGRATION SERVI	CES INC.	
DOCUMENT NUM	P15000073730	· · · · · · · · · · · · · · · · · · ·		
The enclosed Articles	of Amendment and fee are sul	omitted for filing.		
Please return all corre	spondence concerning this mat	ter to the following:		
	BAGUIDY, JOSEPH			
		Name of Contact Person	· · · · · · · · · · · · · · · · · · ·	
	MR. AL TAX AND IMMIGRATION SERVICES INC.			
		Firm/ Company		
	2509 N ANDREWS AVE			
		Address		
	WILTON MANORS, FL 333	311		
		City/ State and Zip Code		
ERC	014@YAHOO.COM			
<del></del>	E-mail address: (to be us	ed for future annual report	notification)	
For further information	on concerning this matter, pleas	se call:		
BAGUIDY, JOSEPH	I	at (	_) 825-1770	
Name	of Contact Person	at (Area Co	de & Daytime Telephone Number	
Fuelgood is a shook f	autha fallandua amanat mada	naughly to the Florida Dune	urtment of Clater	
Enclosed is a check in	or the following amount made	payable to the Florida Depa	arment 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)	
<u>Ma</u>	iling Address	Street	Address	
Amendment Section		*	Amendment Section	
Division of Corporations		Division of Corporations Clifton Building		
P.O. Box 6327		CHRON BUILDING  2661 Everytive Center Circle		

Tallahassee, FL 32301

#### **Articles of Amendment**

## to Articles of Incorporation of

(Name of Corporation as curren	tly filed with the Florida Dept. of State)
(Document Number	of Corporation (if known)
Pursuant to the provisions of section 607.1006, Florida Statutes, this its Articles of Incorporation:	s Florida Profit Corporation adopts the following amendment(s)
A. If amending name, enter the new name of the corporation:	A
name must be distinguishable and contain the word "corporati "Corp.," "Inc.," or Co.," or the designation "Corp.," "Inc," or word "chartered," "professional association," or the abbreviation	"Co". A professional corporation name must contain the
B. Enter new principal office address, if applicable: (Principal office address <u>MUST BE A STREET ADDRESS</u> )	N//1
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)	NIA
D. If amending the registered agent and/or registered office address registered agent and/or the new registered office address Name of New Registered Agent	dress in Florida, enter the name of the
New Registered Office Address:	Proved address . Florida Florida
	(City) (Zip Code)
New Registered Agent's Signature, if changing Registered Agen I hereby accept the appointment as registered agent. I am familiar	it: · with and accept the obligations of the position.
· /	NA
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 <math>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	<u>PT</u>	John Doe	•
X Remove	<u> </u>	Mike Jones	
_X Add	<u>sv</u>	Sally Smith	
Type of Action (Check One)	Title	<u>Name</u>	<u>Addres</u> s
1) Change	CEO	SHERLINE LAJOIE	2420 NW 52 STREET
Add			TAMARAC, FL 33309
Remove			
2) Change			
Add			
Remove			
3 ) Change			
Add			
Remove			
4) Change			
Add			·
Remove			,
5) Change			
Add			
Remove			·
6) Change	**		<del></del>
Add			
Remove			

If amending or adding additional Articles, enter change(s) here: Attach additional sheets, if necessary). (Be specific)	
	<del></del> _
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)	
1///	
N/A	<del></del>
•	
·	
·	

	adoption:	, if other than the
late this document was signed.	0/27/2015	
Effective date if applicable:		
	(no more than 90 days after amendment file date)	
<b>Note:</b> If the date inserted in this document's effective date on the	s block does not meet the applicable statutory filing requirements, this date w Department of State's records.	ill not be listed as the
Adoption of Amendment(s)	( <u>CHECK ONE</u> )	
The amendment(s) was/were a by the shareholders was/were	adopted by the shareholders. The number of votes cast for the amendment(s) sufficient for approval.	
	approved by the shareholders through voting groups. The following statement for each voting group entitled to vote separately on the amendment(s):	
"The number of votes ca	ast for the amendment(s) was/were sufficient for approval	
by	,,	
	(voting group)	
☐ The amendment(s) was/were a action was not required.	adopted by the board of directors without shareholder action and shareholder	
The amendment(s) was/were action was not required.	adopted by the incorporators without shareholder action and shareholder	
10/27/20 Dated	015	-
Signature		
(By sele	a director, president or other officer – if directors or officers have not been cted, by an incorporator – if in the hands of a receiver, trustee, or other court binted fiduciary by that fiduciary)	**************************************
	BAGUIDY, JOSEPH	
	(Typed or printed name of person signing)	
	PRESIDENT	
	(Title of person signing)	