9150005846

(Re	equestor's Name)	
(Ac	ldress)	
(Ac	ldress)	
(Ci	ty/State/Zip/Phone	e #)
PICK-UP	MAIT	MAIL
(Bu	usiness Entity Nar	ne)
(Do	ocument Number)	· · · · · · · · · · · · · · · · · · ·
Certified Copies	_ Certificates	s of Status
Special Instructions to	=	
2 boxe	> Chec	ted
	Office Use On	ılv



900278409189

10/26/15--01028--001 **35.00

NOV 05 2015

R. Write



FLORIDA DEPARTMENT OF STATE Division of Corporations

October 29, 2015

CLAUDIA ESCOBAR 6075 W COMMERCIAL BLVD TAMARAC, FL 33319

SUBJECT: BONILLA CONSTRUCTION, CORP

Ref. Number: P15000075646

We have received your document for BONILLA CONSTRUCTION, CORP and your check(s) totaling \$35.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

You have checked two boxes under adoption of amendment on page 4. Please only check one box.

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.

Rebekah White Regulatory Specialist II

Letter Number: 515A00022931

COVER LETTER

TO: Amendment Section Division of Corporations

Tallahassee, FL 32314

www.			
NAME OF CORPOR	RATION: Bonilla Construct	ion Corp	
DOCUMENT NUMI	BER: P15000075646		
The enclosed Articles	of Amendment and fee are si	abmitted for filing.	
Please return all corres	spondence concerning this ma	ntter to the following:	
	Claudia Escobar		
	***************************************	Name of Contact Perso	n
	CBS Financial		
		Firm/ Company	
	6075 W Commercial Blvd		
		Address	
	Tamarae, FL 33319		
•		City/ State and Zip Cod	e
	E-mail address: (to be u	sed for future annual report	notification)
For further information	concerning this matter, pleas	se call:	
Claudia		954 at (724-4}41 de & Daytime Telephone Number
Name o	(Contact Person	Area Co	de & Daytime Telephone Number
Enclosed is a check for	the following amount made	payable to the Florida Depa	ntment of State:
S35 Filing Fee	□S43.75 Filing Fee & Certificate of Status	☐\$43.75 Filing Fec & Certified Copy (Additional copy is enclosed)	☐\$52.50 Filing Fee Certificate of Status Certified Copy (Additional Copy is enclosed)
Aniei Divis	ing Address idment Section ion of Corporations Box 6327	Amend Divisio	Address ment Section n of Corporations Building

2661 Executive Center Circle

Tallahassee, FL 32301

Articles of Amendment to Articles of Incorporation of

		oť	. J. J. 177
Ronilla Construction Corp			15 NOV - 1 PO
(<u>Name</u>	of Corporation as curre	ntly filed with the Florida	15 NOV -1 PH 1+ 05
15000075646			TALLAUAGE EN FOLCE
	(Document Number	of Corporation (if know)	intentification of the said
ursuant to the provisions of section 60°s Articles of Incorporation:	7.1006, Florida Statutes, th	is Florida Profit Corporatio	n adopts the following amendment
. If amending name, enter the new r	name of the corporation:		
name must be distinguishable and co. Corp." "luc.," or Co.," or the designord "chartered." "professional associ	mation "Corp." "Inc." or	"Co". A professional corp	
. Enter new principal office address	. if annlicable:	1732 S Congress Ave	
Principal office address <u>MUST BE A</u>		Palm Springs, FL 3346	ıl
Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)		1732 S Congress Ave	
		Palm Springs, Fl. 3346	1
. If amending the registered agent a	nd/on magistanad affica ud	dans in Florida autor the	name of the
. It amending the registered agent at			name or the
new registered agent and/or the ne			
new registered agent and/or the ne			
	1732 S Congress Ave		
new registered agent and/or the ne	1732 S Congress Ave	treet uddress)	
new registered agent and/or the ne	1732 S Congress Ave (Florida s		. Florida 33461 (Zip Code)

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 = V ice President; T = T reasurer; S = S ecretary; D = D irector; TR = T rustee; C = C hairman or Clerk; CEO = C hief Executive Officer, CFO = C hief 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.

X Change	PT John	n Doe	
X Remove	<u>V</u> <u>Mik</u>	e Jones	
<u>X</u> Add	<u>SV</u> <u>Sall</u>	y Smith	
Type of Action (Check One)	<u>Title</u>	<u>Name</u>	<u>Address</u>
1) X Change	MGR	Bonitla Lara, Sara	1732 S Congress Ave
Add			Palm Springs, Fl. 33461
Remove			
2) Change			
Add			
Remove			
3)Change		4,	
Add			
Remove			
4) Change			
Add			
Remove			
5) Change			
Add			
Remove			
6) Change			
Add			
Remove			

E. If amending or adding additional Art (Attach additional sheets, if necessary).	ticles, enter change(s) here: (Be specific)
PLEASE ADD EIN 47-5082542	
<u>-</u>	
. If an amendment provides for an exch provisions for implementing the amer	ange, reclassification, or cancellation of issued shares, adment if not contained in the amendment itself:
(if not applicable, indicate $N(A)$	

From CBS Financial 1.954.724.4171 Wed Nov 4 09:29:35 2015 MST Page 6 of 6
The date of each amendment(s) adoption:
November 03, 2015
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 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 sharcholder action and sharcholder action was not required.
November 03, 2015
Dated
Signature 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)
Sara Bonilla Lara
(Typed or printed name of person signing)
PVTD
Title of nerson cimina)