## P15000084056

| (Requestor's Name)                      |
|---|
|   |
| (Address)                               |
| , ,                                     |
| (Address)                               |
| (Address)                               |
|   |
| (City/State/Zip/Phone #)                |
|   |
| PICK-UP WAIT MAIL                       |
|   |
| (Business Entity Name)                  |
| (Business Emity Name)                   |
|   |
| (Document Number)                       |
|   |
| Certified Copies Certificates of Status |
|   |
|   |
| Special Instructions to Filing Officer: |
| ·                                       |
|   |
|   |
|   |
|   |
|   |
|   |
|   |





700304809697

10/23/17--01028--007 \*\*3\$.00

2011 BCT 23 PH 2: 08

MOV 1, 201

Mami Chs

OCT 2 4 2017 I ALBRITTON

## **COVER LETTER**

**TO:** Amendment Section Division of Corporations

| NAME OF CORPOR            | ATION: Albert Liens Corp  |  |  |  |  |  |
|---------------------------|---|--|--|--|--|--|
| DOCUMENT NUMB             | D1 =00000040#4  |  |  |  |  |  |
| The enclosed Articles of  | f Amendment and fee are su  | abmitted for filing.   |  |  |  |  |
| Please return all corresp | ondence concerning this ma  | tter to the following:   |  |  |  |  |
| 1                         | sraei Beato   |  |  |  |  |  |
| _                         |   | Name of Contact Persor   | <u> </u>   |  |  |  |
| 1                         | Beato Pimentel & Associates   |  |  |  |  |  |
| <u>-</u>                  |   | <u> </u>   |  |  |  |  |
| \$                        | Firm/ Company<br>8250 NW 25th St Unit 1   |  |  |  |  |  |
| _                         |   | Address  | <u> </u>   |  |  |  |
| ,                         |   |  |  |  |  |  |
| -<br>-                    | Doral, FL 33122   |  |  |  |  |  |
|                           |   | City/ State and Zip Code   | 2  |  |  |  |
| laura@                    | bpatax.com  |  |  |  |  |  |
|                           | E-mail address: (to be us   | sed for future annual report                                       | notification)  |  |  |  |
|                           |   |  |  |  |  |  |
| For further information   | concerning this matter, pleas   | se call:   |  |  |  |  |
| Israel Beato              |   | at ( 305   | 994-7276   |  |  |  |
| Name of                   | Contact Person  | Area Co  | de & Daytime Telephone Number  |  |  |  |
| Enclosed is a check for   | the following amount made   | payable to the Florida Depa  | artment 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) |  |  |  |
| Amer<br>Divis<br>P.O. I   | ng Address<br>dment Section<br>on of Corporations<br>Box 6327<br>nassee, FL 32314 | Amend<br>Divisio<br>Clifton  | Address ment Section n of Corporations Building xecutive Center Circle                 |  |  |  |

Tallahassee, FL 32301

## Articles of Amendment to Articles of Incorporation of



Albert Liens Corp (Name of Corporation as currently filed with the Florida Dept. of State) P15000084056 (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: Albert General Supplies Corp. 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) C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX) 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 (Horida street address) New Registered Office Address: (City) 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

| P = President; V = Vice<br>Executive Officer; CFO<br>held. President, Treasure<br>Changes should be noted<br>a change, Mike Jones lea<br>Mike Jones, V as Remove | if necess<br>rector title<br>President<br>= Chief F<br>r, Directa<br>in the fol<br>wes the co | ary)  e by the fi  : T= Tree  inancial  or would the  lowing m  orporatio | irst letter of the office title: asurer; S= Secretary; D= Director; TR= Officer. If an officer/director holds mor be PTD. anner. Currently John Doe is listed as the n, Sally Smith is named the V and S. Thes | e than one title, list the first letter<br>he PST and Mike Jones is listed as | of each office<br>the V. There is |
|--|---|---|--|---|-----------------------------------|
| Example: X Change  | PT  | John Do   | <u>oe</u>  |   |                                   |
| X Remove   | <u>V</u>  | Mike Jo   | <u>nes</u>   |   |                                   |
| X Add  | <u>\$V</u>  | Sally Sn  | <u>nith</u>  |   | ļ                                 |
| Type of Action<br>(Check One)  | <u>Title</u>  |   | Name   | <u>Addres</u> s   |                                   |
| I) Change  |   | _   |  |   |                                   |
| Add  |   |   |  |   | <del></del>                       |
| Remove   |   |   |  |   | <u> </u>                          |
| 2) Change  |   |   |  |   | ` \                               |
| Add  |   | _   |  | ·   | 1                                 |
| Remove   |   |   |  |   |                                   |
| 3 ) Change   |   |   |  |   |                                   |
| Add  |   | _   |  | •   |                                   |
| Remove   |   |   |  |   |                                   |
|  |   |   |  |   | i                                 |
| 4) Change  |   | _   |  | -   |                                   |
| Add  |   |   |  |   | - 1                               |
| Remove   |   |   |  |   |                                   |
| 5) Change  |   |   |  |   | 1                                 |
| Add  |   | _   |  |   | <u> </u>                          |
| Remove   |   |   |  |   | 1                                 |
|  |   |   |  |   |                                   |
| 6) Change  |   | _   |  |   |                                   |
| Add  |   |   |  | <del></del>   | <del></del>                       |
| Remove   |   |   |  |   | 1                                 |

If amending the Officers and/or Directors, enter the title and name of each officer/director being removed and title, name, and

|                 | ding additional Articles, ente<br>heets, if necessary).— (Be spe | cific)               |  |              | !            |
|-----------------|--|----------------------|--|--------------|--------------|
| •               | •  | -                    |  |              |              |
|                 |  |                      | <u>.                                    </u> |              | 1            |
|                 |  |                      |  |              |              |
|                 |  |                      |  |              |              |
|                 |  |                      |  |              | 1            |
|                 |  |                      |  |              | <u></u>      |
|                 |  |                      |  |              |              |
| <del></del> .   |  |                      |  |              | 1            |
|                 |  |                      |  |              | ]            |
| <del></del>     |  |                      | <del></del>                                  |              | <u> </u>     |
|                 |  |                      |  |              |              |
|                 |  |                      |  |              | <del>.</del> |
|                 |  |                      |  |              |              |
|                 |  |                      |  |              |              |
|                 |  |                      |  |              |              |
|                 |  |                      |  | -            | <del>,</del> |
|                 |  |                      |  |              | +            |
|                 | •  | <del></del>          |  |              |              |
|                 |  |                      |  |              |              |
|                 |  |                      |  |              |              |
| <u> </u>        |  | <del></del>          | <del></del>                                  |              |              |
|                 |  |                      |  |              |              |
|                 |  |                      |  |              |              |
|                 |  |                      |  |              |              |
|                 |  |                      | <del></del>                                  |              | <u>.</u>     |
|                 |  |                      |  |              |              |
| <del></del>     | <del></del> .  | <u> </u>             |  |              |              |
|                 |  |                      |  |              |              |
|                 |  |                      |  |              |              |
|                 |  |                      |  |              | ì            |
|                 |  |                      |  |              |              |
| f an amendment  | provides for an exchange, rec                                    | lassification, or ca | ncellation of issued                         | shares,      |              |
|                 | plementing the amendment if                                      | f not contained in t | <u>he amendment itsel</u>                    | <u>f:</u>    | ı            |
| (if not applied | ible, indicate N/A)  |                      |  |              |              |
|                 |  |                      |  |              |              |
|                 |  |                      |  | <del> </del> |              |
|                 |  |                      |  |              |              |
|                 |  | <del></del>          |  | <del></del>  |              |
|                 |  |                      |  |              |              |
|                 |  |                      |  |              |              |
|                 |  |                      | <u>.                                    </u> |              |              |
|                 |  |                      |  |              |              |
|                 |  |                      |  |              |              |
|                 |  |                      |  |              |              |
|                 |  |                      |  |              |              |
|                 |  |                      |  |              |              |
|                 |  |                      |  |              |              |
|                 |  |                      |  |              |              |

| •   | ion:   | if other than the  |
|---|--|--------------------|
| date this document was signed. , 11/01/20   | 11.7   |                    |
| Effective date if applicable:   |  | ·<br>              |
|   | (no more than 90 days after amendment file date)   |                    |
| Note: If the date inserted in this block document's effective date on the Department. | does not meet the applicable statutory filing requirements, this date will noment of State's records.  | t be listed as the |
| Adoption of Amendment(s)  | ( <u>CHECK ONE</u> )   |                    |
| The amendment(s) was/were adopted by the shareholders was/were sufficients.           | by the shareholders. The number of votes cast for the amendment(s) ent for approval.   |                    |
| · · · · · · · · · · · · · · · · · · ·   | ed by the shareholders through voting groups. The following statement h voting group entitled to vote separately on the amendment(s):  |                    |
| "The number of votes cast for t   | he amendment(s) was/were sufficient for approval   |                    |
| by  |  | i<br>1             |
|   | (voting group)   |                    |
| action was not required.  | by the board of directors without shareholder action and shareholder by the incorporators without shareholder action and shareholder   | l                  |
| 10/19/2017 Dated Signature  | 2 de la companya della companya dell |                    |
| selected, by  | or prosident or other officer – if directors or officers have not been an incorporator of in the hands of a receiver, trustee, or other court iduciary by that fiduciary)  | <b> </b>           |
| Alb   | ert Liens  |                    |
|   | (Typed or printed name of person signing)  | <del></del>        |
| Pres  | sident   | ļ                  |
| <del></del>   | (Title of person signing)  | <del></del>        |

10/19/2017