

(Requestor's Name)
(Address)
(Address)
,
(City/Chata-77:-/Chata-40
(City/State/Zip/Phone #)
PICK-UP WAIT MAIL
(Business Entity Name)
(Document Number)
·
Certified Copies Certificates of Status
Certificates of Status
Special Instructions to Filing Officer:

Office Use Only



200319231522

10/16/18--01015--026 **35.00

2018 OCT 15 PM 2: 11

O. GOLDEN 00T 2.2 2018

COVER LETTER

Division of Corporations NAME OF CORPORATION: DOCUMENT NUMBER: The enclosed Articles of Amendment and fee are submitted for filing. Please return all correspondence concerning this matter to the following: For further information concerning this matter, please call: 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 & ☐\$43.75 Filling Fee & □\$52.50 Filing Fee Certificate of Status Certified Copy Certificate of Status (Additional copy is Certified Copy enclosed) (Additional Copy is enclosed)

Mailing Address

TO: Amendment Section

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

Articles of Amendment to

	Articles of Amendment to Articles of Incorporation of AFFING The on as currently filed with the Florida Dept. of State)
	Articles of Amendment to
	Articles of Incorporation
IMARK ST	
	PIPING, THE
	A Commence of the state of sta
(Docum	nent Number of Corporation (if known)
ursuant to the provisions of section 607.1006, Florida s Articles of Incorporation:	a Statutes, this Florida Profit Corporation adopts the following amendment(s) to
. If amending name, enter the new name of the co	orporation:
	The new
ame must be distinguishable and contain the wor Corp.," "Inc" or Co.," or the designation "Corp, ord "chartered," "professional association," or the	d "corporation," "company," or "incorporated" or the abbreviation ""Inc," or "Co". A professional corporation name must contain the
Enter new principal office address, if applicable	u:
rincipal office address <u>MUST BE A STREET ADD</u>	DRESS)
. Enter new mailing address, if applicable:	
(Mailing address MAY BE A POST OFFICE BO	<u></u>
	· · · · · · · · · · · · · · · · · · ·
	red office address in Florida, enter the name of the
new registered agent and/or the new registered	office address:
Name of New Registered Agent	nn Labarta
7	80 NE 69.5T MIGINI, 19, 33/38
	(Florida street address) 210
New Registered Office Address:	, Florida
	(City) (Zip Code)
Torry Description of Assessed Co.	
tew Registered Agent's Signature, if changing Reg hereby accept the appointment as registered agent.	istered Agent: Lam familiar with and accept the obligations of the position.
/(./	

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 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>v</u>	Mike Jones	
X Add	<u>sv</u>	Sally Smith	
Type of Action (Check One)	Title	Name	Address
1) Change	_5	Lynn Labourta	780 NE 695T
Add			Apr 310
Remove			Miami, Fr. 33138
2) Change			
Add			
Remove			
3) Change			
Add			
Remove			
4) Change			
Add			
Remove			
5) Change			
Add			
Remove			
6) Change			
Add			
Remove			

E. If amending or adding additional (Attach additional sheets, if necessor)	Articles, enter change(s) here: ry). (Be specific)	
ADDING OFF	icen, secrete	u
	<u> </u>	J
		
	 	
		·
		
		
		
If an amendment provides for an	exchange, reclassification, or cance	llation of issued shares,
(if not applicable, indicate N	amendment if not contained in the a	amendment itself:
	 	
·· · · · · · · · · · · · · · · · · ·		

the date of each amendment(s) adoption: (0 4 20 8	n the				
ote: If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed a ocument's effective date on the Department of State's records.	s the				
doption 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.					
Dated10\8\70\8					
Signature Clura D. Anegus (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)					
Clara Diaz-Bergnes					
(Typed or printed name of person signing)					
- President					
(Title of person signing)					