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PICK-UP	☐ WAIT	MAIL	
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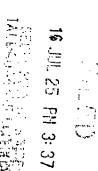
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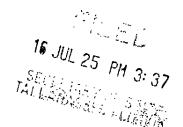
COVER LETTER

TO: Amendment Section

Division of Corporations
NAME OF CORPORATION: Representation
DOCUMENT NUMBER: P 160000 11993
The enclosed Articles of Amendment and fee are submitted for filing.
Please return all correspondence concerning this matter to the following:
Name of Contact Person Ramos Inc. Firm/Company 133 Pience ST #404 Clanwaten Fl. Address Cleanwater fl 33>56 City/State and Zip Code Rafaelb70 @ CMAic. Com E-mail address: (to be used for future annual report notification)
For further information concerning this matter, please call:
Rafaul Ramos at (813) 334-8058. Name of Contact Person Area Code & Daytime Telephone Number
Enclosed is a check for the following amount made payable to the Florida Department of State: \$\begin{align*} \text{\$\subseteq} \$\\$35 \text{ Filing Fee } & \text{\$\subseteq} \$\\$43.75 \text{ Filing Fee } & \text{\$\subseteq} \$\\$43.75 \text{ Filing Fee } & \text{\$\subseteq} \$\\$52.50 \text{ Filing Fee } & \text{\$\cute{certificate of Status}} \\ \text{(Additional copy is enclosed)} \\ \text{(Additional Copy is enclosed)} \end{align*}
Mailing AddressStreet AddressAmendment SectionAmendment SectionDivision of CorporationsDivision of CorporationsP.O. Box 6327Clifton BuildingTallahassee. FL 323142661 Executive Center Circle

Tallahassee, FL 32301

Articles of Amendment to Articles of Incorporation of



Po Ramos

r) Kamos	*1
(Name of Corporation as	currently filed with the Florida Dept. of State)
P 160000 1/993	
	Number of Corporation (if known)
Pursuant to the provisions of section 607.1006, Florida Statuts Articles of Incorporation:	utes, this Florida Profit Corporation adopts the following amendment(s) to
A. If amending name, enter the new name of the corpor	ation:
RRamos Inc	• The new
name must be distinguishable and contain the word "co	orporation," "company," or "incorporated" or the abbreviation nc," or "Co". A professional corporation name must contain the
B. Enter new principal office address, if applicable: (Principal office address <u>MUST BE A STREET ADDRES</u>	1335 PIERCE ST. #406 Clean water fl.
	33456
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)	c/o Rafinel Ramas RRAMOS INC. 1335 Pience ST #406 Cleanwater fl. 33456
D. If amending the registered agent and/or registered of new registered agent and/or the new registered office	ffice address in Florida, enter the name of the
Name of New Registered Agent	
6	Florida street address)
New Registered Office Address:	, Florida
	(City) (Zip Code)
New Registered Agent's Signature, if changing Register I herehy accept the appointment as registered agent. I am	
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 Do	<u>e</u>		
X Remove	<u>V</u>	Mike Jo	nes		
_X Add	<u>sv</u>	Sally Sn	<u>nith</u>		
Type of Action (Check One)	<u>Title</u>		Name		<u>Addres</u> s
1) Change		_			
Add					
Remove					
2) Change					
Add		_		,	
Remove					
3) Change					- 17 170 100 40
Add			<u> </u>		
Add Remove					
4) Change		_			
Add					
Remove					
S) Character					
5) Change		_			
Add					
Remove					•
6) Change		_			
Add					
Remove					

If amending or adding additional Arti (Attach additional sheets, if necessary).	(Be specific)
If an amendment provides for an exch provisions for implementing the ame (if not applicable, indicate N/A)	nange, reclassification, or cancellation of issued shares, and ment if not contained in the amendment itself:
· · · · · · · · · · · · · · · · · · ·	

The date of each amendment(s) a	loption:	, if other than the
date this document was signed.	07/21/2016	
Effective date <u>if applicable</u> :	(no more than 90 days after amendment file	date)
Note: If the date inserted in this bedocument's effective date on the De	lock does not meet the applicable statutory filing require partment of State's records.	ments, this date will not be listed as the
Adoption of Amendment(s)	(CHECK ONE)	
The amendment(s) was/were add by the shareholders was/were su	pted by the shareholders. The number of votes east for the flicient for approval.	e amendment(s)
	roved by the shareholders through voting groups. The foll each voting group entitled to vote separately on the amend	
Dolar.	for the amendment(s) was/were sufficient for approval	
by	(voting group)	
action was not required.	pted by the board of directors without shareholder action a pted by the incorporators without shareholder action and s	
Dated 7	18/2016 Fg /amp.	
(By a d selecte	irector, president or other officer – if directors or officers had, by an incorporator – if in the hands of a receiver, trustee ed fiduciary by that fiduciary)	
	Kafael Komos	
	(Typed or printed name of person signing)	
	Mastdent.	
_	(Title of person signing)	