# P16000035919

| (R                      | equestor's Name)       |  |  |
|-------------------------|------------------------|--|--|
| (A                      | ddress)                |  |  |
| (A                      | ddress)                |  |  |
| (0                      | ity/State/Zip/Phone #) |  |  |
| : PICK-UP               | MAIL MAIL              |  |  |
| (E                      | Business Entity Name)  |  |  |
| (Document Number)       |                        |  |  |
| Certified Copies        | Certificates of Status |  |  |
| Special Instructions to | o Filing Officer:      |  |  |
|                         |                        |  |  |
|                         |                        |  |  |
|                         |                        |  |  |
|                         |                        |  |  |





800285540898

05/10/16--01022--013 \*\*52.50

SING BOX 10 PH 1054

### **COVER LETTER**

**TO:** Amendment Section Division of Corporations

| NAME OF CORPORATIO  | N:   | & RETAIL FL CORP   |   |  |  |  |
|---|--|--|---|--|--|--|
| DOCUMENT NUMBER: _  | P16000035919                               |  |   |  |  |  |
| The enclosed Articles of Ame  | ndment and fee are su                      | bmitted for filing.  |   |  |  |  |
| Please return all corresponder  | ce concerning this ma                      | tter to the following:   |   |  |  |  |
|   |  | MARIO E. JUAREZ  |   |  |  |  |
| <del></del>   | -  | Name of Contact Person   | 1   |  |  |  |
|   | ACCOUNTING SOLUTIONS OF SWFL INC.          |  |   |  |  |  |
|   | Firm/ Company                              |  |   |  |  |  |
|   | 6296 CORPORATE CT SUITE A202               |  |   |  |  |  |
|   | Address                                    |  |   |  |  |  |
|   | FOR  | RT MYERS, FL 33919   |   |  |  |  |
| <del></del>   | <del></del>                                | City/ State and Zip Code   | ,   |  |  |  |
|   | miuarez@                                   | Daccountingsolutionswfl.co   | m   |  |  |  |
| ——————————————————————————————————————  |  | sed for future annual report   |   |  |  |  |
|   | `  | 1  | ,   |  |  |  |
| For further information conce   | ming this matter, pleas                    | e call:  |   |  |  |  |
| MARIO E. JUAREZ   |  | at ( <sup>239</sup>  | 938-0065  |  |  |  |
| Name of Contact Person  |  | Area Coo   | le & Daytime Telephone Number   |  |  |  |
| Enclosed is a check for the following amount made payable to the Florida Department of State: |  |  |   |  |  |  |
|   | \$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) |  |  |  |
| Mailing Address Amendment Section Division of Corporations P.O. Box 6327                      |  | Street Address Amendment Section Division of Corporations Clifton Building |   |  |  |  |
| Tallahassee, FL 32314   |  | 2661 Executive Center Circle   |   |  |  |  |

Tallahassee, FL 32301

#### Articles of Amendment to Articles of Incorporation of

#### JB WHOLESALE & RETAIL FL CORP

| JB WHULESALE & RETA  | IL FL CORP   |
|--|--|
| (Name of Corporation as curre  | ntly filed with the Florida Dept. of State)  |
| P16000035919   |  |
| (Document Number   | r of Corporation (if known)  |
| Pursuant to the provisions of section 607.1006, Florida Statutes, the its Articles of Incorporation:   | nis Florida Profit Corporation adopts the following amendment(s  |
| A. If amending name, enter the new name of the corporation:  |  |
| N/A  | The new  |
| name must be distinguishable and contain the word "corpora "Corp.," "Inc.," or Co.," or the designation "Corp," "Inc.," or word "chartered," "professional association," or the abbreviation | tion," "company," or "incorporated" or the abbreviation r "Co". A professional corporation name must contain the |
| B. Enter new principal office address, if applicable:  | N/A  |
| (Principal office address <u>MUST BE A STREET ADDRESS</u> )  | 53   |
|  |  |
|  |  |
| C. Enter new mailing address, if applicable:   |  |
| (Mailing address MAY BE A POST OFFICE BOX)   | N/A  |
|  |  |
|  | -517   |
|  |  |
| D. If amending the registered agent and/or registered office ad new registered agent and/or the new registered office address.   |  |
| N/A  | ess:   |
| Name of New Registered Agent   |  |
|  |  |
| (Florida   | street address)  |
| New Registered Office Address:   | , Florida  |
|  | (City) (Zip Code)  |
|  |  |
| New Registered Agent's Signature, if changing Registered Age   | ent.   |
| I hereby accept the appointment as registered agent. I am familia  | r with and accept the obligations of the position.   |
|  |  |
|  |  |
| Signature of Mrn   | v Registered Agent, if changing  |
| SIRMANE OF INCH  | I NOTIGICA AYUM. II CHANYINY   |

## 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>oe</u>               |                      |
|-------------------------------|--------------------------|----------|-------------------------|----------------------|
| X Remove                      | $\underline{\mathbf{v}}$ | Mike Jo  | <u>ones</u>             |                      |
| X Add                         | <u>sv</u>                | Sally Sr | <u>nith</u>             |                      |
| Type of Action<br>(Check One) | <u>Title</u>             |          | Name                    | <u>Addres</u> s      |
| 1) Change                     | SEC                      |          | NANCI Y. ARELLANO ORTIZ | 409 NW 27TH AVE.     |
| X Add                         |                          |          |                         | CAPE CORAL, FL 33993 |
| Remove                        |                          |          |                         |                      |
| 2) Change                     |                          | _        |                         | <del></del>          |
| Add                           |                          |          |                         |                      |
| Remove                        |                          |          |                         |                      |
| 3) Change                     |                          | _        |                         |                      |
| Add                           |                          |          |                         |                      |
| Remove                        |                          |          |                         |                      |
| 4) Change                     |                          | _        |                         |                      |
| Add                           |                          |          |                         |                      |
| Remove                        |                          |          |                         |                      |
| 5) Change                     |                          | _        |                         |                      |
| Add                           |                          |          |                         |                      |
| Remove                        |                          |          |                         |                      |
| 6) Change                     |                          | ·        |                         |                      |
| Add                           |                          |          |                         |                      |
| Remove                        |                          |          |                         |                      |

| E. If amending or adding additional Articles, enter change(s) here: (Attach additional sheets, if necessary). (Be specific) |
|---|
| AMENDING ARTICLE VII INITIAL OFFICERS OF THE CORPORATION. BY ADDING MRS. NANCI YANET  |
| ARELLANO ORTIZ AS SECRETARY OF THE CORPORATION. (MS. NANCI YANET ARELLANO ORTIZ   |
| SHE HAS NO OWNERSHIP OR STOCKS OF THE CORPORATION).   |
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|   |
| F. 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)      |
| N/A   |
|   |
|   |
|   |
|   |
| ··· ··· ··· ·· · · · · · · · · · · · ·  |
|   |
|   |

| The date of each amendment(s) adoption:  | , if other than the  |
|--|----------------------|
| date this document was signed.   |                      |
| 04/28/2016 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 redocument's effective date on the Department of State's records.                                      | not be listed as the |
| 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 shareholder action and shareholder action was not required.   |                      |
| 04/28/2016<br>Dated  |                      |
| 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) | -                    |
| BLANCA A. ARELLANO ORTIZ   |                      |
| (Typed or printed name of person signing)  |                      |
| PRESIDENT  |                      |
| (Title of person signing)  |                      |