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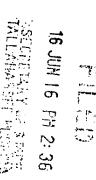
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JUN 22 2016

R. WHITE



## **COVER LETTER**

NAME OF CORPORA	ATION: <u>ALL 57</u> ER: <u>P160000</u> 4	TART CONSTRU	etion Corp.
The enclosed Articles of	f Amendment and fee are su	bmitted for filing.	
Please return all corresp	ondence concerning this mat	tter to the following:	
_	Giraldo	A. Marrel	0
		Name of Contact Persor	1
_			
_	Firm/ Company		
	1555 W	<i>JE</i> 87 37 57 Address	#404
		Address	
	Hialaai	6 FL 330/2 City/ State and Zip Code	~
_	J. W. C. Charles Commun. No Sec	City/ State and Zip Code	2
	Buraldo	Marrelo E sed for future annual report	3 uail com
	E-mail address: (to be us	sed for future annual report	notification)
For further information	concerning this matter, pleas	se call:	
Giraldo	A. Marrell	at ( <u>786</u>	332.8946.
Name of	f Contact Person	Area Co	de & 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 & 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)
Maili	ina Address	Street	Addross

### Mailing Address

TO: Amendment Section

**Division of Corporations** 

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 Articles of Incorporation**



Pursuant to the provisions of section 607.1006, Florida Statutes, this Florida Profit Corporation adopts the following amendment(s) to its Articles of Incorporation:

ALL STAY CONSTYL name must be distinguishable and contain the w "Corp.," "Inc.," or Co.," or the designation "Con word "chartered," "professional association," or the	rp," "Inc," or "Co". A professional cor	orporated" or the abbreviation poration name must contain the
B. Enter new principal office address, if applicable (Principal office address MUST BE A STREET AL	ole: 1555 W DDRESS) Hialeah	EST 37 ST #404 FL 33012.
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE B	1565 We Hialeah	67 37 ST #404 FL 33012.
D. If amending the registered agent and/or registered new registered agent and/or the new registered  Name of New Registered Agent		name of the
·	(Florida street address)	
New Registered Office Address:	(City)	, Florida(Zip Code)
New Registered Agent's Signature, if changing R I hereby accept the appointment as registered agent		itions of the position.
${Si_2}$	gnature of New Registered Agent, if chang	ing

## 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			
Add			
Remove			····
2) Change			
Add			
Remove			
3) Change			
Add			
Remove			
4) Change			
Add			
Remove			
rcmove			
5) Change			
Add			<del> </del>
Remove			
6) Change			
Add			
Remove			

Attach additional sheets, if necessary).	(Be specific)
f an amendment provides for an excl	hange, reclassification, or cancellation of issued shares,
provisions for implementing the ame (if not applicable, indicate N/A)	endment if not contained in the amendment itself:
(ij noi applicable, inaicale WA)	

The date of each amendment(s) adoption:date this document was signed.	, if other than the
Effective date <u>if applicable</u> :	
(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, document's effective date on the Department of State's records.	this date will 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 amen by the shareholders was/were sufficient for approval.	dment(s)
☐ The amendment(s) was/were approved by the shareholders through voting groups. The following 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 sha action was not required.	reholder
☐ The amendment(s) was/were adopted by the incorporators without shareholder action and shareholder action was not required.	lder
Dated 6-11-16/	
Signature	
(By a director, president or other officer – if directors or officers have no selected, by an incorporator – if in the hands of a receiver, trustee, or other officers.	
appointed fiduciary by that fiduciary)	ici comt
Biraldo A Naerero.	
(Typed or printed name of person signing)	
President	

(Title of person signing)