

PI6000082787

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

(Business Entity Name)

(Document Number)

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SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

*Handwritten signature and initials*  
\*WJ  
\*WJ

## COVER LETTER

**TO:** Amendment Section  
Division of Corporations

**SUBJECT:** family revocable trust corporation

Name of Corporation

**DOCUMENT NUMBER:** p16000082787

Please return all correspondence concerning this matter to the following:

andres rodriguez-o

Name of Contact Person

family revocable trust corporati

Firm/Company

po box 558703

Address

miami, fla 33255

City/State and Zip Code

familyrevocabletrust@yahoo.cc

E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

andres rodriguez-o

Name of Contact Person

at (305) 6091811

Area Code & Daytime Telephone Number

Enclosed is a check for the following amount:

☐ \$35.00 Filing Fee

☐ \$43.75 Filing Fee & Certificate of Status

☐ \$43.75 Filing Fee & Certified Copy

☒ \$52.50 Filing Fee, Certificate of Status & Certified Copy

**Mailing Address:**

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



FLORIDA DEPARTMENT OF STATE  
Division of Corporations

November 16, 2016

ANDRES RODRIGUEZ-O  
P.O. BOX 558703  
MIAMI, FL 33255

SUBJECT: FAMILY REVOCABLE TRUST CORPORATION  
Ref. Number: P16000082787

We have received your document for FAMILY REVOCABLE TRUST CORPORATION and your check(s) totaling \$52.50. However, the enclosed document has not been filed and is being returned for the following correction(s):

Articles of Correction must be filed within 30 days of the file date of the document that is being corrected. As the time period for filing Articles of Correction has expired, an amendment to the articles of incorporation could be filed at this time.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6050.

Carol Mustain  
Regulatory Specialist II

Letter Number: 816A00024608

Articles of Amendment  
to  
Articles of Incorporation  
of

Family revocable trust Corporation

(Name of Corporation as currently filed with the Florida Dept. of State)

P16000082787

(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:**

The new 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

Andres Rodriguez - O

939 NW 81st Street

(Florida street address)

New Registered Office Address:

Miami

(City)

Florida

33150

(Zip Code)

**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

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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:

☒ Change      PT      John Doe  
  
☒ Remove      V      Mike Jones  
  
☒ Add      SV      Sally Smith

Type of Action  
(Check One)

Title

Name

Address

- |  |     |                  |                                |
|--|-----|------------------|--------------------------------|
| 1) <input type="checkbox"/> Change         | PDS | ORTEGA, Felipe R | 939 NW 81 <sup>st</sup> Street |
| <input type="checkbox"/> Add               |     |                  | Miami, FL 33150                |
| <input checked="" type="checkbox"/> Remove |     |                  |                                |
| 2) <input type="checkbox"/> Change         | PDS | ANORES           |                                |
| <input checked="" type="checkbox"/> Add    |     | Rodriguez-O      | 939 NW 81 <sup>st</sup> Street |
| <input type="checkbox"/> Remove            |     |                  | Miami, FL 33150                |
| 3) <input type="checkbox"/> Change         |     |                  |                                |
| <input type="checkbox"/> Add               |     |                  |                                |
| <input type="checkbox"/> Remove            |     |                  |                                |
| 4) <input type="checkbox"/> Change         |     |                  |                                |
| <input type="checkbox"/> Add               |     |                  |                                |
| <input type="checkbox"/> Remove            |     |                  |                                |
| 5) <input type="checkbox"/> Change         |     |                  |                                |
| <input type="checkbox"/> Add               |     |                  |                                |
| <input type="checkbox"/> Remove            |     |                  |                                |
| 6) <input type="checkbox"/> Change         |     |                  |                                |
| <input type="checkbox"/> Add               |     |                  |                                |
| <input type="checkbox"/> Remove            |     |                  |                                |

(Attach additional sheets, if necessary). (Be specific)

**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)

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The date of each amendment(s) adoption: 12/12/2016, if other than the date this document was signed.

Effective date if applicable: 12/13/2016  
(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 not be listed as the document's effective date on the Department of State's records.

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.

Dated 12/13/2016

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)

Awores Rodriguez - O  
(Typed or printed name of person signing)

PDS

(Title of person signing)