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COVER LETTER

TO: Amendment Section Division of Corporations

NAME OF CORPO	RATION: SUPER JET SKI I	NC	<u>. </u>	
DOCUMENT NUM	BER: PL7000035459			
	of Amendment and fee are su	bmitted for filing.		
Please return all corre	spondence concerning this ma	tter to the following:		
	CARLOS PEREZ ZABALE	TA		
		Name of Contact Persor	1	
	SUPER JET SKLING			
		Firm! Company		
	186 SE 12TH TERRACE	APT 2002		
		Address		
	MIAMI, FLORIDA 33131			
		City/ State and Zip Code	:	
ezaba	ileta96@gmail.com			
-	E-mail address: (to be us	sed for future annual report	notification)	
For further informatio	n concerning this matter, pleas		100.7358	
Name of Contact Person		at (300-7358 de & Daytime Telephone Number	
Name	of Contact Person	Area Co	de & Daytime Telephone Number	
Enclosed is a check for	r the following amount made	payable to the Florida Depa	rtment of State:	
☐ \$35 Filing Fee	□S43.75 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 Tallahassee, Fl. 32314		Street Address Amendment Section Division of Corporations Clifton Building 2661 Executive Center Circle		
		Tallaha	ssee FL 32301	

Articles of Amendment to Articles of Incorporation of

FILED

SUPER JET SKLING

2019 JAH 1 1 PM 3: 09

	s currently filed with the Florida Dept. of State)
PI.7000035459	TALL ALTHOSEE, FL
(Document	Number of Corporation (if known)
Pursuant to the provisions of section 607.1006, Florida Staits Articles of Incorporation:	stutes, this Florida Profit Corporation adopts the following amendment(s) to
A. If amending name, enter the new name of the corpo	ration:
PRIME QUALITE DISTRIBUTION INC	The new
	corporation," "company," or "incorporated" or the abbreviation Inc," or "Co". A professional corporation name must contain the
B. Enter new principal office address, if applicable:	186 SE 12TH TERRACE APT 2002
(Principal office address MUST BE A STREET ADDRES	<u>SS</u>) MIAMI, FL 33131
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)	186 SE 12TH TERRACE APT 2002
	MIAMI, FL 33131
D. If amending the registered agent and/or registered of new registered agent and/or the new registered office CARLOS PERINARY	ce address:
	ERRACE APT 2002
	(Florida street address)
New Registered Office Address:	, Florida 33131
	(City) (Zip Code)
New Registered Agent's Signature, if changing Register I hereby accept the appointment as registered agent. I am Signatur	

If amending the Officer's 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.

X Change	<u>PT</u>	John Dog	
X Remove	Y	Mike Jones	
X Add	<u>\$V</u>	Sally Smith	
Type of Action (Check One)	Title	<u>Name</u>	Address
() N/A Change			
Add			
Remove			
2) Change			
Add			
Remove			
3) Change		_	
Add			
Remove			
4) Change			
Add			
Remove			
			
5) Change		-	
Add			
Remove			
6) Change			
Add			
Remove			

(Ajtach additį	or adding additional onal sheets, if necessar	ry). (Be specific)				
7/A						
						
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			_		<u> </u>	
						
						
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provisions f	nent provides for an or implementing the	axchange, reclassion amendment if not	<u>neation, or cance</u> contained in the :	<u>llation of issued st</u> imendment itself:	nares,	
(if not a	pplicable, indicate N/s	()				
'A						
	-					
						
					•	
				·····		

The date of each amendment(s) adoption:	, if other than the
date this document was signed.	
01-09-2019 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 document's effective date on the Department of State's records.	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 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):	भ
"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	
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)	
CARLOS PEREZ ZABALETA	
(Typed or printed name of person signing)	
PRESIDENT	
(Title of person signing)	