

PI7000046445

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

(Business Entity Name)

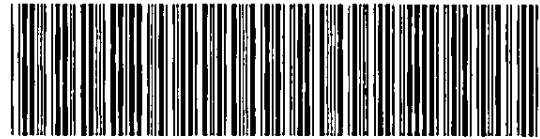
(Document Number)

Certified Copies \_\_\_\_\_ Certificates of Status \_\_\_\_\_

Special Instructions to Filing Officer:

*Wrong Form*

Office Use Only



700315591597

07/12/18 --01022--014 \*\*25.00

08/21/18 --01003--005 \*\*10.00

18 SEP 17 PM 2:52

*Amend*

SEP 19 2018

D CUSHING

COVER LETTER

TO: Amendment Section  
Division of Corporations

NAME OF CORPORATION: MONSTER DETAILING W P B Corp  
DOCUMENT NUMBER: P17000046445

The enclosed *Articles of Amendment* and fee are submitted for filing.

Please return all correspondence concerning this matter to the following:

MERY VILLARREAL GOMEZ

Name of Contact Person

Firm/ Company

2133 Bklo Garden Dr. Ap 104

Address

Wellington; FL 33414

City/ State and Zip Code

meryvillareal@HOTMAIL.COM

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

For further information concerning this matter, please call:

MERY VILLARREAL GOMEZ at ( 561 ) 5727075

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:

☐ \$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)

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

18 SEP 17 PM 2:52

FILED  
NOT RECORDED  
SEP 14 2017  
TALLAHASSEE, FL  
STATE OF FLORIDA  
DEPARTMENT OF STATE



FLORIDA DEPARTMENT OF STATE  
Division of Corporations

July 18, 2018

ENRIQUE GARCIA  
MONSTER DETAILING W.P.B. CORP.  
2350 N MILITARY TRAIL, STE 403  
WEST PALM BEACH, FL 33409

SUBJECT: MONSTER DETAILING W. P.B , CORP.  
Ref. Number: P17000046445

We have received your document for MONSTER DETAILING W. P.B , CORP. and your check(s) totaling \$25.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

The form you submitted is for a Limited Liability Company, but your entity is a Corporation. Please complete and return the enclosed blank form(s).

The filing fee for this amendment is \$35.00. So therefore, we need an additional \$10.00.

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.

Diane Cushing  
Senior Section Administrator

Letter Number: 118A00014738

RECEIVED  
18 AUG 13 PM 4:23  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA



FLORIDA DEPARTMENT OF STATE  
Division of Corporations

RECEIVED  
18 SEP -4 PM 12:57  
SECRETARY OF STATE  
TALLAHASSEE, FL 32311

August 17, 2018

MERY VILLARREAL GOMEZ  
2133 PALO GARDEN DR., APT 104  
WELLINGTON, FL 33414

SUBJECT: MONSTER DETAILING W. P.B , CORP.  
Ref. Number: P17000046445

We have received your document for MONSTER DETAILING W. P.B , CORP. and your check(s) totaling \$35.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

You were advised that you had completed the wrong application and you sent the correct application back blank. You will need to complete the attached form in order to amend your corporation.

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.

Diane Cushing  
Senior Section Administrator

Letter Number: 918A00017068

*\* This document has been sent  
Three times, it was already paid  
in full. The first time it  
was sent, it was shipped complete  
May*



FLORIDA DEPARTMENT OF STATE  
Division of Corporations

September 7, 2018

MERY VILLARREAL GOMEZ  
2133 PALO GARDEN DR., APT 104  
WELLINGTON, FL 33414

SUBJECT: MONSTER DETAILING W. P.B , CORP.  
Ref. Number: P17000046445

We have received your document for MONSTER DETAILING W. P.B , CORP.  
and your check(s) totaling \$35.00. However, the enclosed document has not  
been filed and is being returned for the following correction(s):

You failed to make the correction(s) requested in our previous letter.

Please sign on page 4 and check a box on page 4.

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.

Diane Cushing  
Senior Section Administrator

Letter Number: 918A00018519

RECEIVED  
18 SEP 17 2018  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

Articles of Amendment  
to  
Articles of Incorporation  
of

MONSTER DETAILING W.P.B. CORP.

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

P17000046445

(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 \_\_\_\_\_

\_\_\_\_\_  
(Florida street address)

New Registered Office Address: \_\_\_\_\_, Florida \_\_\_\_\_  
(City) (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

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                      PT        John Doe

X Remove                    V        Mike Jones

X Add                        SV        Sally Smith

| Type of Action<br>(Check One)           | Title | Name            | Address                     |
|---|-------|-----------------|-----------------------------|
| 1) <input type="checkbox"/> Change      | VP    | ALAN LA BERGERE | 2350 N MILITARY TRL STE 403 |
| <input checked="" type="checkbox"/> Add |       |                 | WEST PALM BEACH, FL 33409   |
| <input type="checkbox"/> Remove         |       |                 |                             |
| 2) <input type="checkbox"/> Change      |       |                 |                             |
| <input type="checkbox"/> Add            |       |                 |                             |
| <input type="checkbox"/> Remove         |       |                 |                             |
| 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         |       |                 |                             |

**E. If amending or adding additional Articles, enter change(s) here:**

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

This image shows a single sheet of white paper with horizontal ruling lines. The lines are evenly spaced and run across the width of the page. There are no margins, text, or other markings on the paper.

**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: \_\_\_\_\_, if other than the date this document was signed.

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 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.

JUNE 7, 2018  
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)

ENRIQUE GARCIA

\_\_\_\_\_  
(Typed or printed name of person signing)

PRESIDENT

\_\_\_\_\_  
(Title of person signing)