# P17000012819

(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:
Certified Copies Certificates of Status

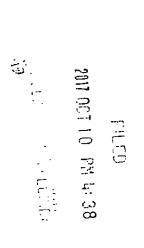
Office Use Only

1168-



000301753010

08/24/17~-01006--028 \*+35.00



OCT 1 1 2017

## **COVER LETTER**

TO: Amendment Section Division of Corporations

NAME OF CORPORATION: CYLINDERS PLUS, INC.
DOCUMENT NUMBER: P17000062819
The enclosed Articles of Amendment and fee are submitted for filing.
Please return all correspondence concerning this matter to the following:
Joseph E. Miller
(Name of Contact Person)
CYLINDERS PLUS, INC.
(Firm/ Company)
3000 N. University Drive Suite E
(Address)
Coral Springs, FL 33065
(City/ State and Zip Code)
LittleIndyJoe@AOL.COM
E-mail address: (to be used for future annual report notification)
For further information concerning this matter, please call:
Joseph E. Miller
(Name of Contact Person) at 954-346-7288 Ext 118 (Area Code) (Daytime Telephone Number)
Enclosed is a check for the following amount made payable to the Florida Department of State:
\$35 Filing Fee Certificate of Status  Certificate of Status  Certified Copy (Additional copy is enclosed)  \$52.50 Filing Fee 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



October 9, 2017

JOSEPH E. MILLER 3000 N. UNIVERSITY DRIVE SUITE E CORAL SPRINGS, FL 33065

SUBJECT: CYLINDERS PLUS, INC.

Ref. Number: P17000062819

We have received your document and check(s) totaling \$35.00. However, the enclosed document has not been filed and is being returned to you for the following reason(s):

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

We are enclosing the proper form(s) with instructions for your convenience.

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.

Letter Number: 917A00020300

Claretha Golden Regulatory Specialist II

www.sunbiz.org



September 18, 2017

JOSEPH E. MILLER 3000 N. UNIVERSITY DRIVE SUITE E CORAL SPRINGS, FL 33065

SUBJECT: CYLINDERS PLUS, INC.

Ref. Number: P17000062819

We have received your document and check(s) totaling \$35.00. However, the enclosed document has not been filed and is being returned to you for the following reason(s):

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

The document you submitted has been prepared pursuant to nonprofit statutes (chapter 617, Florida Statutes). As the entity was originally filed as a corporation for profit, this document should be filed pursuant to chapter 607, Florida Statutes.

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.

Claretha Golden Regulatory Specialist II

Letter Number: 617A00018900

Please see Revised Page 4 per your instructions.

SSETYE. NOT-SPR@

Joseph E. Miller

www.sunbiz.org



# RECEIVED

# FLORIDA DEPARTMENT OF STATE 17 知 15 和作家 Division of Corporations

August 25, 2017

DEPAYTHING OF STATE TYPSICH OF CORPORATIONS TYPE HASSET OF 08104

JOSEPH E. MILLER 3000 N. UNIVERSITY DRIVE SUITE E CORAL SPRINGS, FL 33065

SUBJECT: CYLINDERS PLUS, INC.

Ref. Number: P17000062819

We have received your document and check(s) totaling \$35.00. However, the enclosed document has not been filed and is being returned to you for the following reason(s):

The document you submitted has been prepared pursuant to nonprofit statutes (chapter 617, Florida Statutes). As the entity was originally filed as a corporation for profit, this document should be filed pursuant to chapter 607, Florida Statutes.

We are enclosing the proper form(s) with instructions for your convenience.

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.

Claretha Golden Regulatory Specialist II

Letter Number: 917A00017617

Per the above, please find attached amendment changing the officers and address for Cylinders Plus, Inc. a Florida For Profit Corporation.

Thank you for your assistance in effecting this correction

Jøseph E Miller

Treasurer

www.sunbiz.org

### Articles of Amendment to Articles of Incorporation of

FILEC

CYLINDE	RS PLUS, INC.		2017 OCT	10 Ph 4: 3
(Name of	Corporation as currently f	iled with the Florida		
P17000	062819			~[_0]341
	(Document Number of C	orporation (if known)	13	
Pursuant to the provisions of section 607.10 its Articles of Incorporation:	006, Florida Statutes, this <i>Fl</i>	orida Profit Corporati	ion adopts the following	ng amendment(s) t
A. If amending name, enter the new nan	e of the corporation:			
N/A				The new
name must be distinguishable and conta "Corp.," "Inc.," or Co.," or the designal word "chartered," "professional association	ion "Corp." "Inc." or "Co	". A professional co		
B. Enter new principal office address, if	applicable:	10005 N.W.	58th Street	•
(Principal office address MUST BE A STREET ADDRESS)		Doral, FL	33178	
C. Enter new mailing address, if applica		10005 N W	FOth Ctuant	
(Mailing address MAY BE A POST Of	FFICE BOX)		58th Street	-
		Doral, FL	33178	
D. If amending the registered agent and	or registered office addres	s in Florida, enter the	e name of the	
new registered agent and/or the new				
Name of New Registered Agent	N/A	<u> </u>	<u> </u>	<u></u>
				_
_	(Florida street	address)	<del></del>	
New Registered Office Address:	N/A		Florida	
	(C	(ty)	(Zıp	Code)
New Registered Agent's Signature, if cha	nging Registered Agent:			
I hereby accept the appointment as register	ed agent. I am familiar wit	h and accept the oblig	ations of the position.	
	Signature of New Reg	istered Agent, if chang	zing	_

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 X Remove X Add	<u>V</u> <u>Mil</u>	in <u>Doc</u> ke Jones ly Smith	
Type of Action (Check One)	<u>Title</u>	<u>Name</u>	<u>Addres</u> s
1) Change	_ <u>P</u>	Elen Bernabe	10005 N.W. 58th Street
X Add			Doral, FL 33178
Remove			
2) Change	P ————	Wadid Daoud	3000 N University Drive
Add			Suite E
<b>X</b> _Remove			Coral Springs, Fl 33065
3) Change			
Add			
Remove			
4) Change			
Add			
Remove			
5) Change			_
Add			
Remove			
6) Change		<del></del>	
Add			
Remove			

If amending or adding additional Arti Attach additional sheets, if necessary).	(Be specific)
<del> </del>	
	<del></del>
·	
	. I de la company de la compan
provisions for implementing the ame	nange, reclassification, or cancellation of issued shares, ndment if not contained in the amendment itself:
(if not applicable, indicate N/A)	

The date of each amendment(s) adoption: August 18, 2017 , if other than 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 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.
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)
Joseph E. Miller
(Typed or printed name of person signing)
Treasurer
(Title of person signing)