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# FLORIDA FILING & SEARCH SERVICES, INC.

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PHONE: (800) 435-9371; FAX: (866) 860-8395

DATE: 7/11/18

NAME: 6100 JOHNSON STREET LLC

TYPE OF FILING: AMENDMENT

COST:

RETURN: PLAIN COPY PLEASE

ACCOUNT: FCA00000015

AUTHORIZATION: ABBIE/PAUL HODGE



## FLORIDA DEPARTMENT OF STATE Division of Corporations

July 12, 2018

FLORIDA FILING & SEARCH SERVICES, INC.

ATTN: ABBIE

SUBJECT: 6100 JOHNSON STREET CORP

Ref. Number: P17000068694

We have received your document for 6100 JOHNSON STREET CORP and the authorization to debit your account in the amount of \$. However, the document has not been filed and is being returned for the following:

The fee to file articles of amendment is \$35. Certified copies are optional and are \$8.75 for the first 8 pages of the document, and \$1 for each additional page, not to exceed \$52.50.

Amendments for Florida profit corporations are filed in compliance with section 607.1006, Florida Statutes. Please see the enclosed information.

The registered agent must sign accepting the designation.

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.

Darlene Connell
Regulatory Specialist II Supervisor

Letter Number: 518A00014388

Please Keel Original file date
Thank you!

JUL 16 PH 3: 00

## COVER LETTER

TO: Amendment Syction Division of Corporation

Division of C			January S. F.
NAME OF COR	PORATION:OHSON	STREET CORP	
	MBER: P17000068694		
The enclosed Artic	les of Amendment and fee are	submitted for filing.	
Please return all co	rrespondence concerning this i	natter to the following:	
	EDWARD F GONZALEZ		
		Name of Contact Pers	on
	COMMUNITY CONSUM	ERS GROUP	
		Firm/ Company	
	6100 JOHNSON ST SUITI	E A	
		Address	
	HOLLYWOOD FL 33024		
		City/ State and Zip Co	de .
со	MMUNITYCONSUMERS@@	GMAIL.COM	
<del></del> -	E-mail address: (to be t	ised for future annual repor	t notification)
For further information	on concerning this matter, plea	se call:	
EDWARD F GONZ	ALEZ	at (	7444891
Name	of Contact Person	Area Co	ode & Daytime Telephone Number
Enclosed is a check for	or the following amount made	payable to the Florida Depa	artment of State;
□ \$35 Filing Fee	☐\$43.75 Filing Fee & Certificate of Status	S43.75 Filing Fee & Certified Copy (Additional copy is enclosed)	□\$52.50 Filing Fee Certificate of Status Certified Copy (Additional Copy is enclosed)
	ling Address	Street .	Address
	endment Section	Amendment Section	
	sion of Corporations Box 6327	Division of Corporations Clifton Building	
Tallahassee, FL 32314		2661 Executive Center Circle	

Tallahassee, FL 32301

#### Articles of Amendment to Articles of Incorporation of

6100 JOHSON STREET CORP

(Name of Corporation as	currently filed with the Florida Dept. of State)
P17000068694	
(Document N	lumber of Corporation (if known)
Pursuant to the provisions of section 607.1006, Piorida Statut ts Articles of Incorporation:	stes, this Florida Profit Corporation adopts the following amendment(s
. If amending name, enter the new n me of the corporat	tion:
	The new
ame must be distinguishable and contain the word "corp." Corp.," "Inc.," or Co.," or the designation "Corp.," "Inc ord "chartered," "professional association," or the abbrev	poration," "company," or "incorporated" or the abbreviation c;" or "Co". A professional corporation name must contain the viation "P.4."
Enter new principal office address, if applicable: Principal office address <u>MUST BE A STREET ADDRESS</u>	)
Enter new mailing address, if applicable:	SECTION AND A SE
(Mailing address MAY BE A POST OFFICE BOX)	
If amending the registered agent and/or registered office new registered agent and/or the new registered office ad	e address in Florida, enter the name of the ddress:
Name of New Registered Agent	
	ida street address)
New Registered Office Address:	(City) , Florida , (City)
New Registered Office Address:	(City) , Florida(Zip Code)
v Registered Agent's Signature, if changing Registered A	
reby accept the appointment as registered agent. I am family	gent: liar with and accept the obligations of the position.
Signature of N	ew 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)

Pleas" 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 Cle k; CEO = Chief Executive Officer; CFO = Chief Financial Officer. If an officer/director holds more that 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:

$\underline{X}$ Change	<u>PT</u>	John Doe	
X Remove	$\underline{\mathbf{v}}$	Mike Jones	
<u>X</u> Add	<u>sv</u>	Sally Smith	•
Type of Action (Check One)	Title	<u>Name</u>	<u>Addres</u> s
1) Change	VP	RHIANA C BARRERO	5920 SW 58 CT.
Add			DAVIE, FL 33314
X Remove			
2) Change	TREAS	DANIEL DOALANSKY	769 Peekskill Hollow Road
Add		_	PUTNAM VALLEY, NY 10579
X Remove			
3) Change			
Add			
Remove			<u> </u>
4) Change			
Add		-	
Remove			
i) Change			
Add			
Remove			
) Change			
Add			
Remove			

•	y). (Be specific)			
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-			<del></del>	
	iange, reclassification, o	r cancellation of issu	ied shares,	
n amendment provides for an exch	ndment if not contained			
<u>Sylvions for implementing the ame</u>	ndment if not contained	in the amendment i	tse <u>ir:</u>	
n amendment provides for an exchovisions for implementing the ame (if not applicable, indicate N/A)	ndment if not contained	m the amendanent	<u>tseir:</u>	
<u>Sylvions for implementing the ame</u>	ndment if not contained	m the amendment	iseir:	
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<u>ovisions for implementing the ame</u>	ndment if not contained	The amendagent	iseir:	
<u>ovisions for implementing the ame</u>	ndment if not contained	in the amendagent	iseir:	

date this document was signed.	. if other than t
Effective date <u>if applicable</u> :	
	(no more than 90 days after amendment file date)
Note: If the date inserted in the document's effective date on the	is block does not meet the applicable statutory filing requirements, this date will not be listed as the Department of State's records.
Adoption of Amendment(s)	( <u>CHECK ONE</u> )
☐ The ame.idment(s) was/were by the shareholders was/wer	adopted by the shareholders. The number of votes cast for the amendment(s) sufficient for approval.
☐ The amendment(s) was/were must be separately provided	approved by the shareholders through voting groups. The following statement for each voting group entitled to vote separately on the amendment(s):
"The number of votes c	st for the amendment(s) was/were sufficient for approval
by	(voting group)
	(voting group)
☐ The amendment(s) was/were a action was not required.	dopted by the board of directors without shareholder action and shareholder
☐ The amendment(s) was/were a action was not required.	dopted by the incorporators without shareholder action and shareholder
Dated	-11/-1-12/5
Signature -	
(By a select	director, president or other officer – if directors or officers have not been ed, by an incorporator – if in the hands of a receiver, trustee, or other court otted fiduciary by that fiduciary)
	EDWARD F GONZALEZ
	(Typed or printed name of person signing)
	PRESIDENT
	(Title of person signing)