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Query

COVER LETTER

TO: Amendment Section Division of Corporations

NAME OF CORPOR	ATION: JADA P&R CORP) 		
DOCUMENT NUMB	ER: P18000008922			
	f Amendment and fee are su	bmitted for filing.		
Please return all corres	ondence concerning this ma	tter to the following:		
	KARLA M COELLO			
-		Name of Contact Person	1	
-		Firm/ Company		
	4513 SHADBERRY DR			
-		Address		
	TAMPA, FL 33624			
•		City/ State and Zip Code		
karla2	3jj@gmail.com		,	
	E-mail address: (to be us	sed for future annual report	notification)	
For further information	concerning this matter, pleas			
Name o	f Contact Person	at (Area Co) de & Daytime Telephone Number	
Enclosed is a check for	the following amount made			
■ \$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)	
<u>Mai</u> l	ing Address		Address	
	ndment Section	Amendment Section		
Division of Corporations		Division of Corporations		
P.O. Box 6327 Tallahassee, FL 32314			Clifton Building 2661 Executive Center Circle	

Tallahassee, Fl. 32301

Articles of Amendment to Articles of Incorporation of

JADA P&R,CORP

(Name of Corporation :	as currently filed with the Florida Dept. of State)
P18000008922	
(Document	Number of Corporation (if known)
Pursuant to the provisions of section 607.1006, Florida Stits Articles of Incorporation:	atutes, this Florida Profit Corporation adopts the following amendment(s) to
A. If amending name, enter the new name of the corpo	orațion:
	The new
name must be distinguishable and contain the word " "Corp.," "Inc.," or Co.," or the designation "Corp." word "chartered," "professional association," or the abl	"corporation," "company," or "incorporated" or the abbreviation "Inc," or "Co". A professional corporation name must contain the becviation "P.A."
B. Enter new principal office address, if applicable: (Principal office address MUST BE A STREET ADDRI	ESS)
<u> </u>	
C. Enter new mailing address, if applicable:	m
(Mailing address MAY BE A POST OFFICE BOX)	PH D
	<u> </u>
D. If amending the registered agent and/or registered new registered agent and/or the new registered off	
Name of New Registered Agent	
	(Florida street address)
New Registered Office Address:	Florida
	(City) (Zip Code)
New Registered Agent's Signature, if changing Regist	ered Agent:
Thereby accept the appointment as registered agent. To	nn familiar with and accept the obligations of the position
Signate	ne 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:

 $P \sim President; V = Vice President; T \sim Treasurer; S \sim Secretary; D \sim Director; TR = Trustee; C \sim Chairman or Clerk; CEO = Chief Executive Officer; CFO = Chief Financial Officer. If an officer/director holds more than one title, list the first letter of each office held. President, Treasurer, Director would be PTD.$

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: <u>X</u> Change	<u>PT</u>	John Doe	
X Remove	<u>V</u>	Mike Jones	
X Add	<u>sv</u>	Sally Smith	
Type of Action (Check One)	<u>Title</u>	<u>Name</u>	Address
1) Change	VP	JOSUHAN JIMENEZ MOYA	4513 SHADBERRY DR
X Add			TAMPA, FL 33624
Remove			
2) Change			
Add			
Remove			
3) Change			
Add			
Remove			
4) Change			
Add			
Remove			
9 Change			
Add			
Remove			
Change			
Add			
Remove			

mach additional sheets, if necessary).	(Be specific)
f an anamadanant annaidar for an arab	hange, reclassification, or cancellation of issued shares,
provisions for implementing the ame	endment if not contained in the amendment itself:
(if not applicable, indicate N/A)	
(t) not approxime, material (8.4)	
уу та царпсанс, тасас маг	
у на арупсане, таксие мл	
у на иррасине, тикие мл	
у на арупсане, таксие мл	
у на арупсане, таксие голг	
уу ны арунсанс, таксис голг	
уу та цүүлсанс, таксас гүлг	
у по арупеане, такене голг	
у по арупеат, такие мл	

The date of each amendment(s) adoption: 2 /16/18	, if other than the
date this document was signed.	
Effective date if applicable: 5/16/18 (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.	
Adoption of Amendment(s) (<u>CHECK ONE</u>)	
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	
hy"	
(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)	
the lacilet Kurla C	oello
(Typed or printed name of person signing)	
Production	
(Title of person signing)	