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COVER LETTER

TO: Amendment Section

Division of Corporations

NAME OF CORPORATION: ______

DOCUMENT NUMBER: _ P 18000033788

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

Please return all correspondence concerning this matter to the following:

TERESA H MOLINA

Name of Contact Person

RAINBOW AIR CONDITIONOIG III.INC

Firm/ Company

2121 NE 163 ST APT 1

Address

NORTH MIAMI BEACH FL 33162

City/ State and Zip Code

RAINBOWAC33162@GMAIL.COM

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

For further information concerning this matter, please call:

TERESA H MOLINA

Name of Contact Person

_at (305 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 Certificate of Status (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 <u>Street Address</u> Amendment Section Division of Corporations Clifton Building 2661 Executive Center Circle Tallahassee, FL 32301

Articles of Amendment to Articles of Incorporation of

RAINBOW AIR CONITIONING III JNC

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

P 18000033788

(Document Number of Corporation (if known)

The new

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:

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:	TERESA H MOLINA	
(Principal office address <u>MUST BE A STREET ADDRESS</u>)	1415 LENOX AVE	
	MIAMI BEACH FLA 33139	STER D
C. <u>Enter new mailing address, if applicable:</u> (Mailing address <u>MAY BE A POST OFFICE BOX</u>)		FLURIDA

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	TERESA H MOLINA	<u> </u>
	1415 LENOX AVE	
	(Florida street address)	
<u>New Registered Office Address:</u>	MIAMI BEACH	, Florida
	(City)	(Zip Code)

<u>New Registered Agent's Signature, if changing Registered Agent:</u> *Thereby accept the appointment as registered agent. Tam familiar with and accept the obligations of the position.*

Attotuco

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:

Remove

<u>X</u> Change	<u>PT</u>	John Doe	
<u>X</u> Remove	<u>v</u>	Mike Jones	
<u>X</u> Add	<u>SV</u>	Sally Smith	
<u>Type of Action</u> (Check One)	Title	Name	Address
1) Change	PT	RAMON GONZALEZ	1415 LENOX AVE
Add X Remove			MIAMI BEACH FL 33139
2) X Change	PT	TERESA H MOLINA	1415 LENOX AVE
Add			MIAMI BEACH FL 33139
Remove			
3) Change			
Add Remove			
4) Change			
Add			
Kemove			
5) Change			,,,,,,,,
Add			
Remove			
6) Change			
Add			

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

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

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)

•	
The date of each amendment	(s) adoption:, if other than the
date this document was signed	
	01/01/2018
Effective date <u>if applicable</u> :	
	(no more than 90 days after amendment file date)
	this block does not meet the applicable statutory filing requirements, this date will not be listed as the ne Department of State's records.

Adoption of Amendment(s)

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(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.

Dated 01/01/2018 Signature

(By a director, president or other officer – if directors or officers have not been scleeted, by an incorporator - if in the hands of a receiver, trustee, or other court appointed fiduciary by that fiduciary)

TCRESAH MOLING (Typed or printed name of person signing)

(Title of person signing)

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