# P19 0000 72384

(Re	questor's Name)		
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(Cit	y/State/Zip/Phone	<b>⇒</b> #)	
PICK-UP	☐ WAIT	MAIL	
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Letter Number: 120A00007798

# FLORIDA DEPARTMENT OF STATE Division of Corporations

April 13, 2020

MARIO A. BOLIVAR 15566 SW 19TH LANR MIAMI, FL 33185

SUBJECT: GREASE TRAP KING, CORP

Ref. Number: P19000072384

We have received your document and check(s) totaling \$43.75. However, the enclosed document has not been filed and is being returned to you for the following reason(s):

If the corporation is a **PROFIT** corporation it must be signed 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.

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.

Querida R Moore Regulatory Specialist II

www.sunbiz.org

#### **COVER LETTER**

TO: Amendment Section

P.O. Box 6327

Tallahassee, FL 32314

Division of Corporations NAME OF CORPORATION: Grease Trap King, Corp DOCUMENT NUMBER: P19000072384 The enclosed Articles of Amendment and fee are submitted for filing. Please return all correspondence concerning this matter to the following: Mario A. Bolivar Name of Contact Person Grease Trap King, Corp Firm/ Company 15566 SW 19th Lanr Address Miami, Fl 33185 City/ State and Zip Code bolivarmi@att.nct E-mail address: (to be used for future annual report notification) For further information concerning this matter, please call: at (786 ) 344-3908

Area Code & Daytime Telephone Number Mario A. Bolivar Name of Contact Person Enclosed is a check for the following amount made payable to the Florida Department of State: □\$43.75 Filing Fee & □\$52.50 Filing Fee S35 Filing Fee **■\$43.75** Filing Fee & Certificate of Status Certified Copy Certificate of Status Certified Copy (Additional copy is (Additional Copy enclosed) is enclosed) Mailing Address Street Address Amendment Section Amendment Section Division of Corporations **Division of Corporations** 

The Centre of Tallahassee

Tallahassee, FL 32303

2415 N. Monroe Street, Suite 810

### Articles of Amendment to Articles of Incorporation of

GREASE TRAP KING, CORP.

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

P-19000072384

(Document Number of Corporation (if known)

If amending name, enter the new name of the corporati	on:	
	N/A	The ne
me must be distinguishable and contain the word "corporationc.," or Co.," or the designation "Corp," "Inc," or "Chartered," "professional association," or the abbreviation	o". A professional corporati	ited" or the abbreviation "Corp.
	N/A	
Enter new principal office address, if applicable: rincipal office address MUST BE A STREET ADDRESS )		
rincipal office address <u>MOST BE A STREET ADDRESS</u> )		$\tilde{\sim}$
	4 <del></del>	
77 - 11 SC P. M.		<b>-</b>
Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)	N/A	<b></b>
If amending the registered agent and/or registered office new registered agent and/or the new registered office ac		e name of the
Name of New Registered Agent N/A	ddress:	e name of the
Name of New Registered Agent N/A  Note: Note: N/A		e name of the
Name of New Registered Agent N/A  Note: Note: N/A	iddress:	, Florida
Name of New Registered Agent  N/A  (Flori	ddress:	

☐ The amendment(s) is/are being filed pursuant to s. 607.0120 (11) (e), F.S.

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.

X Change	<u>PT</u>	John Doc	
X Remove	<u>v</u>	Mike Jones	
X Add	<u>sv</u>	Sally Smith	
Type of Action (Check One)	<u>Title</u>	Name	Address
1) Change	v	Mario A. Bolivar	15566 SW 19th Lanc
Add			Miami, FL 33185
X Remove			
2) Change	V	Jeanette Zavala	15566 SW 19th Lane
X Add			Miami, FL 33185
Remove 3) Change			
Add			
Remove			
4) Change			
Add			
Remove			
5) Change			
Add			
Remove			
6) Change			
Add			
Remove			

mending or adding additional Articles, e ach additional sheets, if necessary). (Be :	specific)
•	N/A
<u></u>	<u> </u>
n amendment provides for an exchange,	reclassification, or cancellation of issued shares,
ovisions for implementing the amendme	nt if not contained in the amendment itself:
(if not applicable, indicate N/A)	
	N/A.
	·

The date of each amendmen	.,	, if other than the
date this document was signed	.  To be effective upon State of Florida approval.	
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, the Department of State's records.	his date will not be listed as the
Adoption of Amendment(s)	(CHECK ONE)	
The amendment(s) was/we action was not required.	re adopted by the incorporators, or board of directors without shareholde	er action and shareholder
	re adopted by the shareholders. The number of votes east for the amendere sufficient for approval.	ment(s)
	re approved by the shareholders through voting groups. The following standard for each voting group entitled to vote separately on the amendment(s)	
"The number of vote	s cast for the amendment(s) was/were sufficient for approval	
by Board of Directo	rs	
	(voting group)	
Ma Dated	rch 25, 2020	
Signature	Kais a. Bolions	
Se	by a director, president or other officer – if directors or officers have not elected, by an incorporator – if in the hands of a receiver, trustee, or othe oppointed fiduciary by that fiduciary)	
	Mario A. Bolivar	
	(Typed or printed name of person signing)	
	Prsident	
	(Title of person signing)	<del></del>