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(Re	questor's Name)	
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PICK-UP		
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Certified Copies	_ Certificates	s of Status
Special Instructions to	Filing Officer:	
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## COVER LETTER

TO: Amendment Section Division of Corporations

NAME OF CORPORATION: DE QULECOR INCORPORTED

DOCUMENT NUMBER: P20000049378

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

Please return all correspondence concerning this matter to the following:

GLENDA MCKINNEY

Name of Contact Person

DE QUILECOR CORPORATION

Firm/ Company

2612 46TH AVE N

Address

ST PETERSBURG FL 33714

City/ State and Zip Code

DEQUILECOR@AOL.COM

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

For further information concerning this matter, please call:

GLENDA MCKINNEY

Name of Contact Person Are

at (<u>727</u>) <u>906-5541</u> Area Code & Daytime Telephone Number

Enclosed is a check for the following amount made payable to the Florida Department of State:

□ \$35 Filing Fee

S43.75 Filing Fee & Certificate of Status

S43.75 Filing Fee & Certified Copy (Additional copy is enclosed) S52.50 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 The Centre of Tallahassee 2415 N. Monroe Street, Suite 810 Tallahassee, FL 32303

## Articles of Amendment to Articles of Incorporation of

DE QULECOR INCORPORATED			Ś	23	
	of Corporation as currently	filed with the Florida Dept. of Stat		-3-	
P20000049378				50¥	ŭ i
	(Document Number of		SVII S	25	California California California California
Pursuant to the provisions of section 607 its Articles of Incorporation:	.1006, Florida Statutes, this F	<i>lorida Profit Corporation</i> adopts the	foldowing	autend	ment(s) to
A. <u>If amending name, enter the new n</u> DE QUILECOR INCORPORATED	ame of the corporation:			<u></u> 2	
name must be distinguishable and contain "Inc.," or Co.," or the designation "C "chartered," "professional association,"	Corp." "Inc," or "Co" A	ompany," or "incorporated" or the ab professional corporation name mus	hreviation	n "Corn	ew 5., " ord
B. <u>Enter new principal office address</u> , (Principal office address <u>MUST BE A S</u>	if applicable:	NOT APPLICABLE			_
	<u>(REET/INDRESS</u> )				_
C. Enter new mailing address, if appl (Mailing address <u>MAY BE A POST</u>	icable: OFFICE BOX)	PO BOX 14044		<u></u>	_
		ST PETERSBURG, FL 33714			-
D. If amending the registered agent ar new registered agent and/or the new	<u>id/or registered office addre</u> w registered office address:	ss in Florida, enter the name of the			
Name of New Registered Agent	LARNELL KING				
	5588 Lynn Lake Dr. S Apt. 1	В			
	(Florida stree	( address)			
New Registered Office Address:	ST Petersburg	Florida	33712		_
	((	City)	(Zip Co	ide)	
New Registered Agent's Signature, if cl I hereby accept the appointment as regist	ered agent. Ta <del>m familiar w</del> i	th and accept the obligations of the presence	osition.		
<b>Check if applicable</b> The amendment(s) is/are being filed preserved.					

## 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:** 

<u>X</u> Change	<u>PT</u>	John De	<u>oe</u>	
<u>X</u> Remove	<u>v</u>	<u>Mike Jo</u>	<u>ones</u>	
<u>X</u> Add	<u>SV</u>	<u>Sally S</u>	<u>mith</u>	
<u>Type of Action</u> (Check One)	<u>Title</u>		Name	<u>Addres</u> s
I) Change		_		
Add				
Remove				
2) Change	<u> </u>	_		
Add				
Remove 3 ) Change		_		
Add				
Remove				
4) Change		_		
Add				
Remove				
5)Change	<del>.</del>	_		
Add				·
Remove				
6) Change	i	_		
Add				
Remove				

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

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

Amending correct spelling of the Incorporation Name.

Providing mailing address for the Incorporation.

Updating the Registered Agent.

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Not applicable

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)

	8/18/20	
The date of each amendment(s) adoption:		, if other than the
date this document was signed.		
8/18/20		
Effective date <u>if applicable</u> :		
	(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 the 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 incorporators, or board of directors without shareholder action and shareholder action was not required.
- 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)

Dated NY 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 tiduciary by that fiduciary)

MCKINDEL (Typed or printed name of person sig hing)

(Title of person signing)