21000013292

	(Requestor's Name)	
	(Address)	
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	(City/State/Zip/Phone #)	
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	(Business Entity Name)	
·	(Document Number)	
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Letter Number: 721A00018313

FLORIDA DEPARTMENT OF STATE Division of Company 1981 AUS 30 PM 2: 42

August 4, 2021

JUANITA ADAMS 2440 KINGSTON DRIVE MIRAMAR, FL 33023

SUBJECT: UNITED SERVICEMEN BAKERY EQUIPMENT SALES AND

REPAIRS, INC.

Ref. Number: P21000013292

We have received your document for UNITED SERVICEMEN BAKERY EQUIPMENT SALES AND REPAIRS, INC. and your check(s) totaling \$52.50. However, the enclosed document has not been filed and is being returned for the following correction(s):

The document is illegible and not acceptable for imaging.

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.

Irene Albritton Regulatory Specialist II

www.sunbiz.org

Articles of Amendment to Articles of Incorporation of

Name of Communica	as currently filed with the Floric	In Dunt of Character	
	ras currently they wan the Piorit	ia Dept. of State)	
P21000013292			
(Docume	nt Number of Corporation (if know	n)	
Pursuant to the provisions of section 607,1006, Florida Staticles of Incorporation:	Statutes, this Florida Profit Corpora	ation adopts the following ame	endment(s)
A. If amending name, enter the new name of the cor	poration:		
		The	new
name must be distinguishable and contain the word "cor "Inc.," or Co.," or the designation "Corp," "Inc," "chartered," "professional association," or the abbrevi	or "Co". A professional corpore	orated" or the abbreviation "Co	orp"
B. Enter new principal office address, if applicable:		r~3	
Principal office address <u>MUST BE A STREET ADDR</u>	PESS)	2	
		<u></u>	<u> </u>
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Enter new mailing address, if applicable:		P	, ; }
(Mailing address MAY BE A POST OFFICE BOX	, <u> </u>	10	
		9	
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 If amending the registered agent and/or registered new registered agent and/or the new registered of 		the name of the	
Name of New Registered Agent			
	(Florida street address)		
New Registered Office Address:		. Florida	
	(City)	(Zip Code)	
ew Registered Agent's Signature, if changing Regis			
hereby accept the appointment as registered agent. To	ım familiar with and accept the obl	igations of the position.	
	are of New Registered Agent, if char		

Check if applicable

[☐] 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.

Example: 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)	Title	<u>Name</u>	<u>Addres</u> s
1) X Change	P	Juanita Adams	2440 Kingston Drive
Add			Miramar, Florida 33023
Remove			
2) X Change	S	Juanita Adams	2440 Kingston Drive
Add			Miramar, Florida 33023
Remove 3) Change	P	Anthony Gamble	2440 Kingston Drive
Add	4		Miramar, Florida 33023
X Remove			
4) Change	T	Sandra Hawkins	2440 Kingston Drive
X Add	•		Miramar, Florida 33023
Remove			
5) Change			
Add			
Remove			
6) Change			
Add			
Remove			

	l sheets, if necessary)). (Be specific)			
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		change, reclassif	<u>ication, or cancell</u>	ation of issued shar	es,
f an amendmen	<u>t provides for an ex</u>				
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provisions for i	t provides for an ex- mplementing the an cable, indicate N/A)	nendment if not c	contained in the a	menament usen:	
provisions for i	mplementing the an	<u>nendment if not (</u>	contained in the a	menoment (tsen:	
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The date of each amendment(s) adoption:	if other than the
date this document was signed.	
Effective date if applicable:	
(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 document's effective date on the Department of State's records.	not be listed as the
Adoption of Amendment(s) (<u>CHECK ONE</u>)	
■ The amendment(s) was/were adopted by the incorporators, or board of directors without shareholder action and action was not required.	shareholder
☐ 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"	
by	
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)	_
Juanita Adams	
(Typed or printed name of person signing)	
Secretary	
(Title of person signing)	