

P96000094964

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

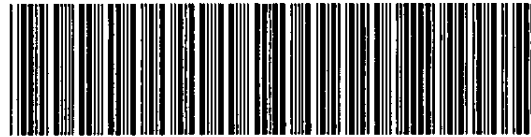
(Business Entity Name)

(Document Number)

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FILED
12 APR 25 PM 3:30
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

Amend
000412

COVER LETTER

TO: Amendment Section
Division of Corporations

NAME OF CORPORATION: Pates Plus, Inc.

DOCUMENT NUMBER: P96000094964

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

Please return all correspondence concerning this matter to the following:

Yola Olivier

Name of Contact Person

Pates Plus, Inc.

Firm/ Company

11638 Ne 2nd Avenue

Address

Miami Shores Fl 33161

City/ State and Zip Code

cpa160@aol.com

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

For further information concerning this matter, please call:

Jay M. Needelman, CPA

Name of Contact Person

at (305) 673-5040

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

☐ \$43.75 Filing Fee &
Certified Copy
(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

Street Address

Amendment Section
Division of Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, FL 32301

RECEIVED

12 APR -5 AM 8:54

TALLAHASSEE, FL 32314



FLORIDA DEPARTMENT OF STATE
Division of Corporations

April 11, 2012

YOLA OLIVER
PATES PLUS, INC.
11638 NE 2ND AVENUE
MIAMI SHORES, FL 33161

SUBJECT: PATES PLUS, INC.
Ref. Number: P96000094964

We have received your document for PATES PLUS, INC., however, upon receipt of your document no check was enclosed. Please return your document along with a check or money order made payable to the Department of State for \$35.00.

The fee to file articles of amendment is \$35. Certified copies are optional and are \$8.75 for the first 8 pages of the document, and \$1 for each additional page, not to exceed \$52.50.

If you have any questions concerning the filing of your document, please call (850) 245-6050.

Karen Gibson
Document Specialist Supervisor

Letter Number: 612A00011552

RECEIVED
12 APR 24 PM 12:05
TALLAHASSEE, FLORIDA

Articles of Amendment
to
Articles of Incorporation
of

FILED
12 APR 25 PM 3:30
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

Pates Plus, Inc.

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

P96000094964

(Document Number of Corporation (if known))

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:

The new 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:

(Principal office address MUST BE A STREET ADDRESS)

C. Enter new mailing address, if applicable:

(Mailing address MAY BE A POST OFFICE BOX)

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 Yola Olivier

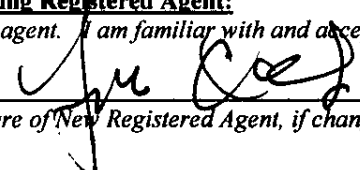
11638 Ne 2nd Avenue

(Florida street address)

New Registered Office Address: Miami Shores, Florida 33161
(City) (Zip Code)

New Registered Agent's Signature, if changing Registered Agent:

I hereby accept the appointment as registered agent. I am familiar with and accept the obligations of the position.


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:

X Change PT John Doe
X Remove V Mike Jones
X Add SV Sally Smith

Type of Action (Check One)	Title	Name	Address
1) <u>X</u> Change ___ Add ___ Remove	<u>D</u>	<u>Cuckita Bellande</u>	<u>11638 Ne 2nd Avenue</u> <u>Miami Shores Fl</u> <u>33161</u>
2) ___ Change <u>X</u> Add ___ Remove	<u>P</u>	<u>Yola Olivier</u>	<u>11638 Ne 2nd Avenue</u> <u>Miami Shores Fl</u> <u>33161</u>
3) <u>X</u> Change ___ Add ___ Remove	<u>VP</u>	<u>Frantz Olivier</u>	<u>7710 Granada Boulevard</u> <u>Miramar Fl</u> <u>33023</u>
4) <u>X</u> Change ___ Add ___ Remove	<u>D</u>	<u>Maxime Olivier</u>	<u>6025 Tremayne Dr.</u> <u>Mount Dora Fl</u> <u>32757</u>
5) <u>X</u> Change ___ Add ___ Remove	<u>T</u>	<u>Theresa Olivier-Cassagnol</u>	<u>4750 Brandywine Drive</u> <u>Boca Raton Fl</u> <u>33487</u>
6) <u>X</u> Change ___ Add ___ Remove	<u>D</u>	<u>Flore Olivier</u>	<u>4401 Cortina Circle #336</u> <u>Fort Myers Fl</u> <u>33916</u>

E. If amending or adding additional Articles, enter change(s) here:
(attach additional sheets, if necessary). (Be specific)

ADD: GERARD PHILIPPE OLIVIER: CEO

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: 4/1/12

Effective date if applicable: 4/1/12

(no more than 90 days after amendment file date)

Adoption of Amendment(s) (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 4/1/12

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)

Yola Olivier

(Typed or printed name of person signing)

President

(Title of person signing)