P98000106480

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2009 MAR -3 AM 8: 58
SECRETARY OF STATE

Amend

TB 3/4/09

COVER LETTER

TO: Amendment Section Division of Corporations

P.O. Box 6327

Tallahassee, FL 32314

NAME OF CORPORATION: ALL LAND & EQUIPMENT INC			
DOCUMENT NUMBER: P 98 000 10 6 480			
The enclosed Articles of Amendment and fee are submitted for filing.			
Please return all correspondence concerning this matter to the following:			
Anabel Egozue (Name of Contact Person)			
ALL LAND & EQUIPMENT INC.			
(Firm/ Company)			
4034 NW 70th Ave			
(Address)			
CORD Springs, FL 33065			
For further information concerning this matter, please call:			
Anabel Egozue at (954) 224-222. (Name of Contact Person) (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 \$ \$43.75 Filing Fee \$ Certificate of Status (Additional copy is enclosed) \$52.50 Filing Fee \$ Certified Copy (Additional Copy is enclosed)			
Mailing AddressStreet AddressAmendment SectionAmendment SectionDivision of CorporationsDivision of Corporations			

Clifton Building

2661 Executive Center Circle Tallahassee, FL 32301



FLORIDA DEPARTMENT OF STATE Division of Corporations

February 20, 2009

ANABEL EGOZCUE ALL LAND & EQUIPMENT INC. PO BOX 670127 CORAL SPRINGS, FL 33067

SUBJECT: ALL LAND & EQUIPMENT INC.

Ref. Number: P98000106480

We have received your document for ALL LAND & EQUIPMENT 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):

A post office box is not an acceptable address for the registered agent.

The designation of the registered agent must be at a Florida street address.

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) 245-6925.

Teresa Brown Regulatory Specialist II

Letter Number: 609A00006033

SECRETARY OF STATE SAMPLE SOUGHAR -3 AH 81007

SECRETARY OF STATE SAMPLE AND SOUTH AND SOUTH AND STATE SAMPLE AND SOUTH AND SO

	tion TAC 2009 MAR -3 AM 8:
· Articles of Amendm	ient 200
to	VION PAR
Articles of Incorpora	SECON 3
All I and No En insured	E Florida Dept. of State) IALLAHASSEE, FLORIDA
All Land & Equipment	TAC.
(Name of Corporation as cultently filed with the	E Florida Dept. of State)
<u> </u>	
(Document Number of Corporation	a (if known)
Pursuant to the provisions of section 607.1006, Florida Statutes following amendment(s) to its Articles of Incorporation:	s, this Florida Profit Corporation adopts the
A. If amending name, enter the new name of the corporation:	
The new name must be distinguishable and contain the "incorporated" or the abbreviation "Corp.," "Inc.," or Co.," "Co". A professional corporation name must contain association," or the abbreviation "P.A."	or the designation "Corp," "Inc," or
B. Enter new principal office address, if applicable:	
(Principal office address <u>MUST BE A STREET ADDRESS</u>)	
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)	P.O. Box 670127
(LORAL Springs FL
-	23.06.7
-	5700 T
D. If amending the registered agent and/or registered office at new registered agent and/or the new registered office addr.	
Name of New Registered Agent: Anabe	d Egozcue
1/024 1	vas 20th Ave
New Registered Office Address: (Floridge	a street address)
Coral S	prings, FL, Florida 33065
· ·	(Cip) (Zip Code)
New Registered Agent's Signature, if changing Registered Age	
I hereby accept the appointment as registered agent. I am fa position.	miliar with and accept the obligations of the

position.

Signature of New Registered Lend 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)

Title	Name	Address	Type of Action
V.P	Alexander S. Egozue	226 E Flasher St	Add
	,—(·····	Ste 20 0	Remove
		Mau, + 4 2451	
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E Ifamo	uding an adding additional Anticles outons	sh a = = a(a) h = ===	
	nding or adding additional Articles, enter additional sheets, if necessary). (Be specifi		
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	amendment provides for an exchange, reck		
	sions for implementing the amendment if n I not applicable, indicate N/A)	ot contained in the amendment	<u>itself:</u>
ν.,	,,		

			•

The date of each amendment(s) adoption:
Effective date if applicable: (no more than 90 days after amendment file date)
(no more than 90 days uper amenament fite 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 statements the 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 shareholde action was not required.
The amendment(s) was/were adopted by the incorporators without shareholder action and shareholder action was not required.
Dated $\frac{2/36/2009}{0}$
Signature (By a director, president of 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)
huis E. Egozae (Typed or printed name of person signing)
President.
Tresident.