

P99000011889

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

Special Instructions to Filing Officer:

Office Use Only



600104542416

06/25/07--01024--007 **35.00

FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS
07 JUL 12 AM 8:32

Amend
C. Coulllette

JUL 13 2007

COVER LETTER

**TO: Amendment Section
Division of Corporations**

NAME OF CORPORATION: All in One Drywall, Inc.

DOCUMENT NUMBER: P99000011889

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

Please return all correspondence concerning this matter to the following:

Orlando Marrero
(Name of Contact Person)

All in One Drywall, Inc.
(Firm/ Company)

1840 James Ave #26
(Address)

Miami Beach FL 33139
(City/ State and Zip Code)

For further information concerning this matter, please call:

Orlando Marrero at (305) 431-7238
(Name of Contact Person) (Area Code & Daytime Telephone Number)

Enclosed is a check for the following amount:

- | | | | |
|---|--|---|--|
| ☒ \$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



FLORIDA DEPARTMENT OF STATE
Division of Corporations

June 28, 2007

ORLANDO MORRERO
ALL IN ONE DRYWALL, INC.
1840 JAMES AVE., #26
MIAMI BEACH, FL 33139

SUBJECT: ALL-IN-ONE DRYWALL, INC.
Ref. Number: P99000011889

We have received your document for ALL-IN-ONE DRYWALL, INC. and check(s) totaling \$35.00. However, the enclosed document has not been filed and is being returned to you for the following reason(s):

You have only submitted the first page of your amendment form. We need the second sheet with the adoption, date and signature of officer.

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) 245-6903.

Cheryl Coulliette
Document Specialist

Letter Number: 407A00042157

RECEIVED
07 JUL 12 AM 8:00
DIVISION OF CORPORATIONS

COVER LETTER

TO: Amendment Section
Division of Corporations

NAME OF CORPORATION: All in One Drywall Inc.

DOCUMENT NUMBER: 999000011889

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

Please return all correspondence concerning this matter to the following:

Orlando Marrero

(Name of Contact Person)

All in One Drywall, Inc.

(Firm/ Company)

1840 James Ave #26

(Address)

Miami Beach, FL 33139

(City/ State and Zip Code)

For further information concerning this matter, please call:

Orlando Marrero

(Name of Contact Person)

at (305) 431-7238

(Area Code & Daytime Telephone Number)

Enclosed is a check for the following amount:

☐ \$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

Articles of Amendment

to

Articles of Incorporation
of

All-in-One Drywall, Inc.

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

999 000011 889

(Document number of corporation (if known))

FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS
07 JUL 12 AM 8:32

Pursuant to the provisions of section 607.1006, Florida Statutes, this **Florida Profit Corporation** adopts the following amendment(s) to its Articles of Incorporation:

NEW CORPORATE NAME (if changing):

N/A

(Must contain the word "corporation," "company," or "incorporated" or the abbreviation "Corp.," "Inc.," or "Co.")
(A professional corporation must contain the word "chartered", "professional association," or the abbreviation "P.A.")

AMENDMENTS ADOPTED- (OTHER THAN NAME CHANGE) Indicate Article Number(s) and/or Article Title(s) being amended, added or deleted: **(BE SPECIFIC)**

This amendmet is to add an officer/director
the name is → Jose A. Marrero title: D
he will share 10% of shares.

Jose A. Marrero

1840 James Ave #26

Miami Beach FL 33139.

(Attach additional pages if necessary)

If an amendment provides for 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)

(continued)

The date of each amendment(s) adoption: 6/21/07

Effective date if applicable: 6/21/07
(no more than 90 days after amendment file date)

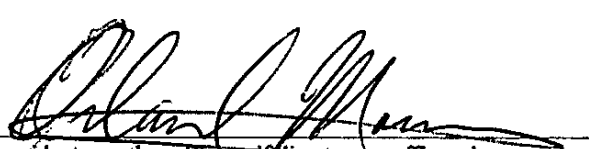
Adoption of Amendment(s) **(CHECK ONE)**

- ☒ The amendment(s) was/were approved 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.

Signature X


(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)

Orlando Marrero

(Typed or printed name of person signing)

President

(Title of person signing)

FILING FEE: \$35