

P990000106718

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

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☐ MAIL

(Business Entity Name)

(Document Number)

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100213167721

Amend

10/11/11--01015--015 **43.75

FILED
2011 NOV -1 PM 4:52
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

*00789, 00721, 00671

ASR
11/1/11



FLORIDA DEPARTMENT OF STATE
Division of Corporations

October 13, 2011

Grisel Boza
G & B Kitchen Cabinets Repairs Corp.
14260 SW 142 Street, Suite 103
Miami, FL 33186

SUBJECT: G & B KITCHEN CABINETS REPAIRS CORP.
Ref. Number: P99000106718

We have received your document for G & B KITCHEN CABINETS REPAIRS CORP. and your check(s) totaling \$43.75. However, the enclosed document has not been filed and is being returned for the following correction(s):

Our records indicate the current name of the entity is as it appears on the enclosed computer printout. Please correct the name throughout the document.

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) 245-6907.

Annette Ramsey
Regulatory Specialist II

Letter Number: 911A00023483

RECEIVED
11 NOV -1 AM 10:36
TALLAHASSEE, FLORIDA

COVER LETTER

TO: Amendment Section
Division of Corporations

NAME OF CORPORATION: G & B KITCHEN CABINETS REPAIRS CORP.

DOCUMENT NUMBER: P99000106718

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

Please return all correspondence concerning this matter to the following:

GRISELL BOZA

Name of Contact Person

G & B KITCHEN CABINETS REPAIRS CORP.

Firm/ Company

14260 SW 142 STREET SUITE 103

Address

MIAMI FL 33186

City/ State and Zip Code

epolledo@bellsouth.net

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

For further information concerning this matter, please call:

GRISELL BOZA

Name of Contact Person

at (305) 586-5472

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

Articles of Amendment
to
Articles of Incorporation
of

FILED

2011 NOV -1 PM 4:52

G & B KITCHEN CABINETS REPAIRS CORP.

(Name of Corporation as currently filed with the Florida Department of State, Secretary of State, TALLAHASSEE, FLORIDA)

P99000106718

(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)

SAME AS ABOVE

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:

ROGER BOZA

New Registered Office Address:

15743 SW 60TH. STREET

(Florida street address)

MIAMI

(City)

Florida 33193

(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)

<u>Title</u>	<u>Name</u>	<u>Address</u>	<u>Type of Action</u>
P/D	GRISEL BOZA	15743 SW 60TH STREET MIAMI FL 33193	<input type="checkbox"/> Add <input checked="" type="checkbox"/> Remove
P/D	ROGER BOZA	15743 SW 60TH STREET MIAMI FL 33193	<input checked="" type="checkbox"/> Add <input type="checkbox"/> Remove
			<input type="checkbox"/> Add <input type="checkbox"/> Remove

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

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

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: SEPTEMBER 21, 2011

Effective date if applicable: SEPTEMBER 24, 2011
(date of adoption is required)
(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 OCTOBER 21, 2011

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)

GRISEL BOZA

(Typed or printed name of person signing)

PRESIDENT/INITIAL INCORPORATOR

(Title of person signing)