## 5223/2

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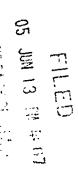
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Amend T. Lewis



## **COVER LETTER**

**TO:** Amendment Section Division of Corporations

NAME OF CORPORATION: St Au	6 GRP.	
DOCUMENT NUMBER: S 223	12	
The enclosed Articles of Amendment and fee a	re submitted for filing.	
Please return all correspondence concerning thi	s matter to the following:	
Ms. PRISCILLA F	-RILA IND of Contact Person)	
St Aug Corf	m/ Company)	
P.O. Box 402	486 (Address)	
MIMM BLOWN (City/St	ate and Zip Code)	)
For further information concerning this matter,	please call:	
Ms PRISCULA FRIEDAND (Name of Contact Person)	at (305) 538 - 9 (Area Code & Daytime	նն   Telephone Number)
Enclosed is a check for the following amount:		
\$35 Filing Fee \$\Bigcup \$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	Street Address	

Amendment Section
Division of Corporations
P.O. Box 6327
Tallahassee, FL 32314

Amendment Section Division of Corporations 409 E. Gaines Street Tallahassee, FL 32399



## FLORIDA DEPARTMENT OF STATE Glenda E. Hood Secretary of State

May 31, 2005

MS. P. FRIEDLAND % ST. AUG CORP. PO BOX 402486 MIAMI BEACH, FL 33140

SUBJECT: ST. AUG CORP. Ref. Number: S22312

We have received your document for ST. AUG CORP. 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 can make all your changes on the amendment form for the same fee of \$35.00 or send \$35.00 for each form. You cannot use officer/director resignation form to add officers/directors. (Per phone conversation with Mr. Friedland have enclosed a profit amendment form for you convenience.)

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) 245-6908.

Anna Chesnut Document Specialist

Letter Number: 305A00038727

Articles of Amendment Articles of Incorporation of (Name of corporation as currently filed with the Florida Dept. of State) (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: NEW CORPORATE NAME (if changing): (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) P.O BOX 402486 MIMI BOACH, FLA 33140 ALAN G. KIRNIS, ESP 350 E. LAS OLAS BLUD 17+97 FT LAND FLA 33301 (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:
Effective date if applicable: Older of the policy of the p
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.
Signed this day of June, 2005
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)  (Typed or printed name of person signing)
(Title of person signing)

FILING FEE: \$35

## STATEMENT OF CHANGE OF REGISTERED OFFICE OR REGISTERED AGENT OR BOTH FOR CORPORATIONS

Pursuant to the provisions of sections 607.0502, 617.0502, 607.1508, or 617.1508, Florida Statutes, this statement of change is submitted for a corporation organized under the laws of the State of HORIDA
in order to change its registered office or registered agent, or both, in the State of Florida.
1. The name of the corporation: St. AUG. CORP.
2. The principal office address: PO BOX 402486
MIAMI BLOCK, FLORIDA 33140
3. The mailing address (if different):
4. Date of incorporation/qualification: 1813 1991 Document number: 522312
5. The name and street address of the current registered agent and registered office on file with the Florida Department of State:
Theodore Kienis
115- 4th DILIDO TERRICE
W100 Borry 1 33730
11/WAIT 12/0(B) 1-1 00100
6. The name and street address of the new registered agent (if changed) and /or registered office (if changed):
ALLA G. KIENIS ESQ.
350 EAST US OLAS BOULOVARD 17th FLOOR (P.O. Box NOT acceptable)
Ft. Wildordale, FC 33301
The street address of its registered office and the street address of the business office of its registered agent, as changed will be identical.
Such change was authorized by resolution duly adopted by its board of directors or by an officer so authorized by the board, or the corporation has been notified in writing of the change.
Insula Fredland VP Printed or typed name and title)
I hereby accept the appointment as registered agent and agree to act in this capacity.  I further agree to comply with the provisions of all statutes relative to the proper and complete performance of my duties, and I am familiar with and accept the obligation of my position as registered agent. Or, if this document is being filed merely to reflect a change in the registered office address, I hereby confirm that the corporation has been notified in writing of this change.
(Signature of Registered Agent) (Date)
If signing on behalf of an entity:  AUN G. KIPNIS ESQ  (Typed or Printed Name)

\* \* \* FILING FEE: \$35.00 \* \* \*