Electronic Filing Menu

Corporate Filing Menu

Help

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				COVER LETTER				
TO: Amendme Division o								
NAME OF CO)RPOR	ATION: 4119	PONC	E DE LEON, IN	IC.			
DOCUMENT	NUMBI	P13000	06751	4				
		f Amendment and						
Please return a	ll corresp	ondence concernii	ng this mat	ter to the following:				
	(C/O Frank	Rodrig					
		Melo Real I	Estata	Name of Contact Person	1			
	-	WEIG REAL	LSIAIC	Firm/ Company		 		
	1	605 W FLA	GLER	/				
	-			Address				
	_	Miami, FL 3	33130	0:- 10 17: O-1				
				City/ State and Zip Cod	e :			
	frm	@meloreal						
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For further infe	ormation	concerning this m	atter, pleas	se call:	ĺ			
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				at (<u> </u>		 -	
	Name o	f Contact Person	}	Area Co	de & Daytime Teleph	one Number		
Enclosed is a c	check for	the following amo	ount made	payable to the Florida Depa	artment of State:			
🗀 \$35 Filing	Fee	S43.75 Filir Certificate o		☐\$43.75 Filing Fee & Certified Copy (Additional copy is enclosed)	□\$52.50 Filing Fe Certificate of Sta Certified Copy (Additional Copy (s enclosed)	LTZ		٠
	Ame Divi P.O.	line Address ndment Section sion of Corporation Box 6327 thassee, FL 32314) 15	Amen Divisi Cliftor 2661 f	Address Iment Section on of Corporations Building Executive Center Circl assee, FL 32301	c		
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THOM MICHWAIL SENTERP	+3053745095	T-184 P.803/006 F-030
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H13000195195 3	Articles of Amendment	FILED
	70	13 SFP - 2 -
	Articles of Incorporation of	13 SEP -3 PM 2: 55
4119 PONCE DE LEON, INC		SEGRETARY OF STATE FALLAHASSEE, FLORIDA
	ntly filed with the Florida Dept, of State)	- TELAMASSEE FLORIDA
P13000067514		, ida
	per of Corporation (if known)	
·	Torida Statutes, this Flarida Profit Corporation add	opts the following amendment(s) to
A. If amending pause, enter the new name of	the corporation:	
		and a second
name must be distinguishable and contain the "Corp.," "Inc.," or Co.," or the designation word "chartered," "professional association," of the contact of th	e ward "corporation," "company," er "incorpoi "Corp," "Inc," or "Co". A professional corpora or the abbreviation "P.A."	The new rated" or the abbreviation tion name must contain the
B. Enter new principal office address, if appli (Principal office address MUST BE A STREET		
		
•		
C. Fater new mailing address, if applicable: (Mailing address MAY BE A POST OFFIC	E BOX)	
D. If amending the registered agent and/or re new registered agent and/or the new regist	eistered office address in Florida, enter the pametered of fice address:	e of the
Name of New Registered Agant		
 -	(Florida street address)	
New Registered Office Address:	}	
NEW RESISTENCE Office Address.	(Cisy) Florida	(Zip Code)
		, ,
New Registered Agent's Signature, if changing I hereby accept the appointment as registered ag	g Registered Agent: ent. I am famillar with and accept the obligations	of the position.
Signature	of New Registered Agent. If changing	
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address of each Officer at (Auach additional sheets, Please note the officer/dir P = President: V = Vice 1 Executive Officer; CFO = held. President, Treasurer Changes should be noted a change, Mike Jones lea Mike Jones, V as Remove,	ind/or Di if necessi ector title President, = Chief F Directo in the fol vos the ci	irector being adde ary) by the first letter (T ~ Treasurer. S- Tinancial Officer. Ir would be PTD. Howing munner. C Proporation, Sally S.	of the office title: - Secretary; D= Director; TR+ Tru If an officer/director holds more the brrently John Doe is listed as the PS with is named the V and S. These s.	isses; C = Cha an one title, ti ST and Mike J	girman or C ist the first	Clerk; CEO = letter of each ut as the V. T	= Chief n office There is
Example: X.Change	<u>PT</u>	John Doc					
X Remove	<u>v</u>	Mike Iones					
_X Add	<u>\$V</u>	Sally Smith	1				
Type of Action (Check One)	Title	<u>Name</u>		<u>Addres</u> s			
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X_Add		-		MIAMI,	FL 33	130	
Remove					,— <u>—</u> ,—,—,		
2) Change		_					
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! If amending or add (Attach additional s	ding additional Articles, er sheets, if necessary). (Be s	nterichange(s) berg: pec(fic)		
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r. <u>II an amenoment</u> <u>provisions for in</u>	notementing the amendmen	reclassification, or cancellation of issued shar at if not contained in the amendment itself:		
(if not applied	table, indicate N/A)		}	
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The date of each amendmend date this document was signed	d.	ust 29,	2013	13 SEP Segneta	3 PH 2	. if other th	han the
Effective date if applicable:			ys ofter amenda	SEGRETA FALL AHAG vent file date)	Fig. CF ST	TATE TRIDA	
Aduption of Amendment(s)	Снеск	ONE)					
The amendment(1) was/w by the shareholders was/v	ere adopted by the shareb were sufficient for approv		mber of votes ca	st for the amendr	าะทะ(ล)		
The amendment(a) was/w must be separately provide	ere approved by the share ded for each voting group						
"The number of vot	es cast for the amendmen	i(s) was/were su	ifficient for appr	n al			
by	(voting gr	oup)		- - -"			
The amendment(s) was/w action was not required.			hout shareholder	r section and share	holder		
The amendment(s) was/w action was not required.	ere adopted by the incorp	orators without	sharcholder acti	on and sharehold	er		
	ugust 29, 20)13	1/				
	(By a director, president of selected, by an incorporal appointed fiduciary by the	tor — it' in the ha				-	
	Francişo	co Rodi	iguez				
	1	•	ed name of pers	on signing)		_	
	Incorpor	rator					
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