Division of Corporations

Page 1 of 2

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TO:

Division of Corporations

Fax Number : (850)617-6380

From:

Account Name : E & F LATIN GROUP LLC

Account Number : 120160000049 : (954)384-8565 Phone

: (954)385-5175 Fax Number

Enler the email address for this business entity to be used for future annual report mailings. Enter only one email address please.

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COR AMND/RESTATE/CORRECT OR O/D RESIGN ECONOTEL, CORPORATION

> Certificate of Status 1 0 Certified Copy Page Count 07 Estimated Charge \$43.75

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1/17/2020

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Ω	OVER LETTER
l'O: Amendment Section Division of Corporations	
NAME OF CORPORATION: ECONOTEL, CORPORA	TION
DOCUMENT NUMBER: P02000122637	
The enclosed Articles of Amendment and fee are submitted	l for filing.
Please return all correspondence concerning this matter to t	he following:
Diego Figueron	
Nan	ne of Contact Person
E & F LATIN GROUP LLC	
	Pirm/ Company
1820 N CORPORATE LAKES BLV	/D STE 109
	Address
WESTON FL 33326	
City	/ State and Zip Code
DIEGO@EFLATINACCOUNTING	_ !
E-mail address: (to be used for	future annual report notification)
For further information concerning this matter, please call:	
Diego Figueroa	at () 384 8565
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:
Certificate of Status Ce	3.75 Filing Foe & S52.50 Filing Foe riffed Copy Certificate of Status ditional copy is 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 The Centre of Tullahassee 2415 N. Monroe Street, Suite 810 Tallahassee, FL 32303

Articles of Amendment to
Articles of Incorporation of

ECONOTEL, CURPORATION		
(Name	of Corporation	as currently filed with the Florida Dept. of State)
P02000122637]
	(Documer	nt Number of Corporation (if known)
Pursuant to the provisions of section 607 its Articles of Incorporation:	.1006, Florida S	Statutes, this Florida Profit Corporation sclopts the following amendment(s) to
A. If amending name, enter the new a	ame of the corr	poratien:
		The new
	Corp." "Inc." o	poration," "company," or "incorporated" or the abbreviation "Corp" or "Co". A professional curporation name must contain the word
B. Enter new principal office address.		1820 N CORPORATE LAKES BLVD
(Principal office address MUST BE A S		SUITE 107
		WESTON FL 33326
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)		1820 N CORPORATE LAKES BLVD
		SUITE 107
		WESTON FL 33326
D. If amending the registered agent agent agent agent agent and/or the new	ed/or registered w registered off	i office address in Florida, enter the name of the
Name of New Registered Avent	E&FLATIN	GROUP LLC
	1820 N CORP	ORATE LAKES BLVD STE 109
		(Florible street address)
New Registered Office Address:	WESTON	(City) , Florida (City Code)
		db tar comy
Now Registered Agent's Stonature, If c I hereby accept the appointment as regin	hanging Registratered agent. I a	iered Ascut: um familiur with and accept the abligations of the position.
	Pi	ire of New Registered Agent, if changing
	Signatu	TE OF FICH REGISTED PRETE, 9 CHARGING
Check if applicable The amendment(s) is/are being filed p	emember to 8, 607	[7.01 2 0 (11) (e), F.S.

Remove

ddress of each Office Attach additional sheen the officer: '= President; V= Vio Executive Officer; CF(President, Treasurer, Indinges should be not a change, Mike Jones.	er and/or \ ets. If neces /director ti- ce Presider 0 = Chief I Director wi- ted in the fi leaves the c	Director being sided: isary) tle by the first letter of the office title: it; T= Treasurer; S= Secretary; D= Director; Financial Officer. If an officer/director holds mould be PTD. bllowing manner. Currently John Doe is listed	officer/director being removed and title, name, and TR= Trustee; C = Chairman or Clark; CEO = Chie, ore than one title, list the first letter of each office held as the PST and Mike Jones is listed as the V. There is These should be noted as John Doe, PT as a Change,
X Change	PT	John Doc	
X Remove	<u>v</u>	Miko Iones	
X Add	<u>sv</u>	Sally Smith	
Type of Action (Check One)	Title	Name	Address
1)Change	D	JAVIER PINZON- DIRECTOR	701 CAMBLIA CT
X Add	-		PLANTATION FL 333 7
Remove			
2) Change	C	LILIANA PINZON - OFFICER	1820 NCORPORATE LAKES
X Add			BLVD, SUITE 107
•		1	WESTON FL 33326
Remove 3) Change	CFO	GILBERTO PINZON	1820 NCORPORATE AKES
X Add			BLVD, SUITE 107
Remove			WESTON PL 33326
4) Change	DR	RICCI, OSCAR A	1318 SW 160TH AVENUE
Add			BAY A-6 (SHOPPING CENTER)
X Remove			SUNRISE FL 33326
	DR	MARIO E GOCHEZ	1318 SW 160TH AVENUE
5) Change			BAY A-6 (SHOPPING CENTER)
Add			SUNRISE FL 33326
Remove	PD	CARLOS LILLO	2100 CORAL WAY SUITE 605
6) Change			MIAMI FL 33145
Add			

Add

Remove

tdress of each Office (ttach additional she lease note the officer = President; V= VI xecutive Officer; CF(resident, Treasurer, I hanges should be no change, Mike Jones tike Jones, V as Remo	ers and/or the sets, if necessor/director the comment of the set o	Director being added: Isory) Ile by the first letter of the office title: It; T= Treusurer; S= Secretary; D= Directional Officer. If an officer/director hold by PTD. Illuming manner. Currently John Doe is his	sch officer/director being removed and title, name, and tor: TR= Trustee; C = Chairman or Clerk; CEO = Chief is more than one title, list the first letter of each office held sted as the PST and Mike Jones is listed as the V. There is d S. These should be noted as John Doe, PT as a Change,
lxample: X_Change	et	John Doc	
X Remove	¥	Mike Jones	
X Add	<u>8V</u>	Sally Smith	
Type of Action (Check One)	<u>Title</u>	Name	<u>Addres</u> #
1) Change	PD	SCAVO, MIGUEL A	2771 EXECUTIVE PARK DRIVE
Add			SUITE 2A Europe
X Remove			WBSTON FL 33331
2) Change	PD	JOSE GARCIA	2863 EXECUTIVE PARK DR
Add			SUITE 104
X Remove			WBSTON FL 33331 54 99
3) Change	PD	JORGE OSPINA	2100 CORAL WAY
Add			SUITE 605
X Remove			MIAMI FL 33145
4) Change	PD	HECTOR BRAIN	2863 EXECUTIVE PARK DR
Add			SUTTE 104
X Remove			WESTON FL 33331
5) Change			
Add	•		
Remove			
6) Change			

if amending or adding additional Artic Attach additional sheets, if necessary).	(Be specific)	<u> </u>	
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f an amendment provides for an exchi	nge, recinstificatio	m or cancellation of issued ther	20 JAN 17 SECOLLIAN STILAHASSE
f an amendment provides for an exchi- provisions for implementing the amen	dment if not conta	ined to the amendment itself:	N 17
(if not applicable, indicate N/A)			\$ **\$
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			(D)
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The date of each amendment(s) adoption	1: 01/01/2020		, if other than the
are this document was signed.			
Effective date <u>if applicable</u> :	(no more then	90 days after unwndment file date)	
	•		
Note: If the date inserted in this block do locument's effective date on the Departme		dicable statutory filing requirements, this date w	ill not be listed as the
Adoption of Amendment(s)	(CHECK ONE)		
The amendment(s) was/were adopted by action was not required.	y the incorporators, o	er board of directors without shareholder action as	nd shareholder
☐ The amendment(s) was/were adopted by by the shareholders was/were sufficient		The number of votes cast for the amendment(s)	
The amendment(s) was/were approved must be separately provided for each w	by the shareholders to oring group entitled t	hrough voting groups. The following statement to vote separately on the amendment(s):	20 JAN Strati
"The number of votes cast for the	amendment(s) was/v	 were sufficient for approval 	
by		.,,	
	(voting group)		10 P
			A Section of the sect
Dated 01/16/2020	$\alpha \Lambda = - \Lambda$		
Signature	moles	<u> </u>	dD ³³
(By a director,	president or other of	ficer - if directors or officers have not been	
	thincorporator—it in triary by that riducial	the hands of a receiver, trustee, or other court	
4	Ţ, v, Ţ		
JAVIS	R PINZON		
	(Typed or printe	d name of person signing)	
DIREC	CTOR		
	(Title of person	signing)	