Florida Department of State

Division of Corporations Electronic Filing Cover Sheet

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Division of Corporations

Fax Number : (850)617-6380

From:

Account Name -

: R&P ACCOUNTING AND TAXES INC

Account Number : I20170000090

Phone

(305)358-1310

Fax Number

: (305)503-6701

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

COR AMND/RESTATE/CORRECT OR O/D RESIGN ARGENT PRODUCTS CORP

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Articles of Amendment to Articles of Incorporation

2015 ATT 26 ATT-8: 45

(Name of Corporation as cui	rrently filed with the Florida Dept. of State)
P0700005	
(Document Nun	nber of Corporation (if known)
Pursuant to the provisions of section 607,1006. Florida Statutes	s, this Florida Profit Corporation adopts the following amendmen
its Articles of Incorporation:	the state of the s
A. If amending name, enter the new name of the corporation	<u>on:</u>
	The new
name must be distinguishable and contain the word "corporatio "Inc.," or Co.," or the designution "Corp," "Inc." or "Co "chartered," "professional association," or the abbreviation	on," "company," or "incorporated" or the abbreviation "Corp., " o". A professional corporation name must contain the word
B. Enter new principal office address, if applicable:	2750 NE 183 rd Street Apt 1812
(Principal office address <u>MUST BE A STREET ADDRESS</u>)	Aventura, FL 33160
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)	2750 NE 183 rd Street Apt 1812
	Aventura, FL 33160
	The state of the s
D. If amending the registered agent and/or registered office new registered agent and/or the new registered office ad-	e address in Florida, enter the name of the
D. If amending the registered agent and/or registered office new registered agent and/or the new registered office ad Name of New Registered Agent	e address in Florida, enter the name of the idress:
new registered agent and/or the new registered office ad	e address in Florida, enter the name of the dress:
new registered agent and/or the new registered office ad Name of New Registered Agent	e address in Florida, enter the name of the idress:
new registered agent and/or the new registered office ad Name of New Registered Agent (Flori	ida sirvet address)
new registered agent and/or the new registered office ad Name of New Registered Agent	ldress:
new registered agent and/or the new registered office ad Name of New Registered Agent (Flori	ida sirvet address)

Signature of New Registered Agent, if changing

Check if applicable

☐ The amendment(s) is/are being filed pursuant to s. 607.0120 (11) (e), F.S.

Example:

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)

Please note the officer/director title by the first letter of the office title:

P = President; V = Vice President; T = Treasurer; S = Secretary; D = Director; TR = Trustee; C = Chairman or Clerk; CEO = Chief Executive Officer; CFO = Chief Financial Officer, If an officer/director holds more than one title, list the first letter of each office held. President, Treasurer, Director would be PTD.

Changes should be noted in the following manner. Currently John Doc is listed as the PST and Mike Jones is listed as the V. There is a change. Mike Jones leaves the corporation, Sally Smith is named the V and S. These should be noted as John Doe, PT as a Change. Mike Jones, V as Remove, and Sally Smith, SV as an Add.

X Change	· <u>PT</u>	John Doe	
X Remove	<u>v</u>	Mike Jones	
X Add	<u>\$v</u>	Sally Smith	
Type of Action (Check One)	Tille	<u>Name</u>	Address
1) X Change	P	MAURICIO COYRADAS	2750 NE 183 rd Street Apt 1812
Add			Aventura, FL 33160
Remove			
2) X Change	P	MARIA ELENA ARANDA	2750 NE 183 rd Street Apt 1812
Add			Aventura, FL 33160
Remove 3)Change			
Add			
Remove			
4)Change		<u> </u>	
Add	•		
Remove			
5) Change			
Add			
Remove			
δ) Change			
Add			
Remove			

E. If amending or ad (Attach additional)	heets, if necessary). (Be soer)	(ic)			:		•	
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If an amendment p	provides for an ex	hange, recis	ssification	ı, or cance	llation of	Issued sha	ares.		
<u> </u>	olementing the an ble, indicate N/A)	iendment if n	ot contain	ned in the	amendm	ent itself:	·. · · · · · · · ·		
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The date of each amendment(s) a date this document was signed.	doption:							 ,	if other	than the
	3/25/2020						•			
THE THE PARTY OF T		(no more ti	han 90 day:	s after am	endment fi	le date)				
Market Market State Committee Committee					`. 		•			•
Note: If the date inserted in this I document's effective date on the D	plock does ni epartment of	of meet the a State's recor	applicable rds.	statutory (iiling requ	irements,	this date	will no	t be list	ed as the
Adoption of Amendment(s)	(<u>CH</u>	ECK ONE)			•	·	·.			
☐ The amendment(s) was/were ad	opted by the	Incorporator	s, or board	of directo	rs without	sharehold	ет action	and sha	reholde	r .
action was not required.	` .							··.		
The amendment(s) was/were ad by the shareholders was/were s	opted by the ufficient for a	shareholders approval	The num	ber of vot	es çast for	the amend	iment(s)		•	
The amendment(s) was/were ap must be separately provided for	proved by the	shareholder group entitle	rs through ed to vote s	voting gro eparately	ups. The j on the am	iollowing s endinent(s	uat e meni)			
"The number of votes cast	for the amer	idment(s) wa	is/were suf	ficient for	approval			•		· · · .
by		·.	· ·	` ` .						
	(voti	ing group)			. ,			•		
08/25/20 Dated	20		1			• • .:			` .	•
Signature X	- Go	Vin	11/		•		•		-	·
(By a d	irector, presi d, by an invo ted fiduciary	porator - if	in the hand	f directors is of a rec	or officer	s have not lee, or othe	been er court			
	MAURICIO	COYRADA	AS			• • •				
	(Typed or pri	nted name	of person	signing)	· : ·				
	PRESIDEN	T .	·						. `	**
	. (Title of perso	on signing)				,	-		
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