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(Re	questor's Name)	
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PICK-UP	WAIT	MAIL
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Certified Copies	_ Certificates	of Status
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2025 JUN 26 AHII: OI

COVER LETTER

Division of Corporations NAME OF CORPORATION: LASSCO DEVELOPEMNT INC DOCUMENT NUMBER: The enclosed Articles of Amendment and fee are submitted for filing. Please return all correspondence concerning this matter to the following: **GILBERTO CASTANO** Name of Contact Person Firm/ Company 3471 NW 55TH STREET Address FT LAUDERDALE FL 33309 City/ State and Zip Code gil@lasscoinc.com E-mail address: (to be used for future annual report notification) For further information concerning this matter, please call: at (704) 9091593

Area Code & Daytime Telephone Number GILBERTO CASTANO Name of Contact Person Enclosed is a check for the following amount made payable to the Florida Department of State: \$35 Filing Fee ☐\$43.75 Filing Fee & ☐\$43.75 Filing Fee & ☐\$52.50 Filing Fee Certificate of Status Certificate of Status Certified Copy (Additional copy is Certified Copy enclosed) (Additional Copy is enclosed) **Mailing Address** Street Address Amendment Section Amendment Section

Division of Corporations

Tallahassee, FL 32303

The Centre of Tallahassee 2415 N. Monroe Street, Suite 810



Division of Corporations

Tallahassee, FL 32314

P.O. Box 6327

TO: Amendment Section

Articles of Amendment to Articles of Incorporation of

LASSCO DEVELOPMENT INC				
(Name	of Corporation as currently	y filed with the Florida Dept. of State	<u>)</u>	
P14000030647				
	(Document Number of	Corporation (if known)		
Pursuant to the provisions of section 607 its Articles of Incorporation:	.1006, Florida Statutes, this I	Florida Profit Corporation adopts the	following amendmen	nt(s) to
A. If amending name, enter the new n	ame of the corporation:			
			The new	
name must be distinguishable and contain "Inc.," or Co.," or the designation "Cartered," "professional association,"	Corp." "Inc." or "Co". A			
B. Enter new principal office address, (Principal office address MUST BE A S		N/A		
(Frincipal office dauress MOST BE AS	TREET ADDRESS)			
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)		N/A	Ø _{S ≥}	
			75.	4=====
		- Marie et al.		
				
D. If amending the registered agent ar	nd/or registered office addr	ess in Florida, enter the name of the	5 AH 3 SSE	
new registered agent and/or the ne			AHII: 06 Of State See, Fl	A series
Name of New Registered Agent	N/A		FA 0	
				
	(Florida stre	pet address)		
View Besterned (Affice Address)	N/A	Pleade		
New Registered Office Address:		, Florida_ (City)	(Zip Code)	
New Registered Agent's Signature, if c			•.•	
I hereby accept the appointment as regist	erea ageni. Tam jaminar w	nin ana accepi ine obugations oj ine pi	osuion,	
	Signature of New Re	egistered Agent, if changing		
Check if applicable The amendment(s) is/are being filed p	ourrought to c. 607.0120.(11).(a) E.S		
The amendment(s) is are being med p	ursuam to 5. 007.0120 (11) (C), 1		



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 Doe 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.

Example: X Change	<u>PT</u>	John Doc	
X Remove	<u>V</u>	Mike Jones	
X Add	<u>sv</u>	Sally Smith	
Type of Action (Check One)	<u>Title</u>	Name	<u>Addres</u> s
1) Change	P	JORGE LASSES	3471 NW 55TH STREET
Add			FT LAUDERDALE ,FL, 33309
X Remove			
2) X Change	P	GILBERTO CASTANO	3471 NW 55TH ST
Add			FT LAUDERDALE FL 33309
Remove 3) Change	S	SEBASTIAN CASTANO	3471 NW 55TH ST
X Add			FT LAUDERDALE FL 33309
Remove			
4) Change		<u> </u>	
Add			
Remove			
5) Change			
Add			
Remove			
6) Change			
Add			
Remove			



If amending or adding additional Ar	cles enter change(s) here:	
(Attach additional sheets, if necessary).	(Be specific)	
ILBERTO CASTANO IS NEW PRESI	ENT	
·		
		
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		· · · · · · · · · · · · · · · · · · ·
If an amendment provides for an exc provisions for implementing the am	ange, reclassification, or cancellation of issue ndment if not contained in the amendment it	e <u>d shares,</u> self:
(if not applicable, indicate N/A)		
ILBERTO CASTANO GETS 100% SH.	RES	
 		
		· · · · · · · · · · · · · · · · · ·



• •	03-30-2025	
The date of each amendmen date this document was signed		, if other than the
	03-30-2025	
Effective date <u>if applicable</u> :	(no more than 90 days after amendment file date)	_
Note: If the date inserted in document's effective date on	this block does not meet the applicable statutory filing requirement the Department of State's records.	s, this date will not be listed as the
Adoption of Amendment(s)	(<u>CHECK ONE</u>)	
☐ The amendment(s) was/we action was not required.	re adopted by the incorporators, or board of directors without shareho	older action and shareholder
	ere adopted by the shareholders. The number of votes cast for the americal sufficient for approval.	endment(s)
☐ The amendment(s) was/we must be separately provid	ere approved by the shareholders through voting groups. The following ded for each voting group entitled to vote separately on the amendmen	ig statement u(s):
"The number of vote	s cast for the amendment(s) was/were sufficient for approval	
by100% Votes		
<u>.</u>	(voting group)	
Dated Signature _ (I s	By a director, president grother officer – if directors or officers have elected, by an incorporator – if in the hands of a receiver, trustee, or appointed fiduciary by that fiduciary) Jorge Lasses	
	(Typed or printed name of person signing)	
	President	
	(Title of person signing)	2025 JUN 26 AM II: 06 SECULIATION OF STATE TALLATIANSSEE, FL

