

P140000063781

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐

PICK-UP

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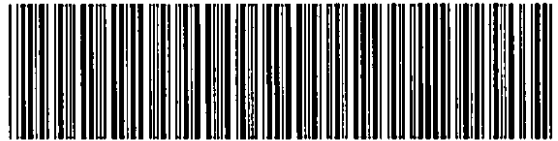
(Business Entity Name)

(Document Number)

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FILED
2018 AUG 13 AM 10:48
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

Amend/name
chg

AUG 14 2018

I ALBRITTON

COVER LETTER

TO: Amendment Section
Division of Corporations

NAME OF CORPORATION: IRON PLUS 22 CORP.

DOCUMENT NUMBER: P14000063781

The enclosed *Articles of Amendment* and fee are submitted for filing.

Please return all correspondence concerning this matter to the following:

ISIS ISABEL

Name of Contact Person

H & I TAX

Firm/ Company

1860 N PINE ISLAND RD SUITE 111

Address

PLANTATION FL 33322

City/ State and Zip Code

INFO@HITAXINVESTMENT.COM

E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

ISIS ISABEL

Name of Contact Person

at (954)

6005801

Area Code & Daytime Telephone Number

Enclosed is a check for the following amount made payable to the Florida Department of State:

☒ \$35 Filing Fee

☐ \$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

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

Street Address

Amendment Section
Division of Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, FL 32301

Articles of Amendment
to
Articles of Incorporation
of

IRON PLUS 22 CORP.

(Name of Corporation as currently filed with the Florida Dept. of State)

P14000063781

(Document Number of Corporation (if known))

FILED
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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

Pursuant to the provisions of section 607.1006, Florida Statutes, this *Florida Profit Corporation* adopts the following amendment(s) to its Articles of Incorporation:

A. If amending name, enter the new name of the corporation:

CC EVENT PLANNING CORP

The new name must be distinguishable and contain the word "corporation," "company," or "incorporated" or the abbreviation "Corp.," "Inc.," or "Co.," or the designation "Corp.," "Inc.," or "Co.". A professional corporation name must contain the word "chartered," "professional association," or the abbreviation "P.A."

B. Enter new principal office address, if applicable:

(Principal office address MUST BE A STREET ADDRESS)

2658 NW 97TH AVE MIAMI FL 33172

C. Enter new mailing address, if applicable:

(Mailing address MAY BE A POST OFFICE BOX)

2658 NW 97 TH AVE MIAMI FL 33172

D. If amending the registered agent and/or registered office address in Florida, enter the name of the new registered agent and/or the new registered office address:

Name of New Registered Agent

(Florida street address)

New Registered Office Address:

(City)

, Florida

(Zip Code)

New Registered Agent's Signature, if changing Registered Agent:

I hereby accept the appointment as registered agent. I am familiar with and accept the obligations of the position.

Signature of New Registered Agent, if changing

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 PT John Doe

X Remove V Mike Jones

X Add SV Sally Smith

| Type of Action (Check One) | Title | Name | Address |
|--|----------|----------------------------------|-----------------------------|
| 1) <input type="checkbox"/> Change | <u>P</u> | <u>DAVILA, MAURICIO B</u> | <u>6500 CYPRESS RD#404</u> |
| <input type="checkbox"/> Add | | | <u>PLANTATION, FL 33317</u> |
| <input checked="" type="checkbox"/> Remove | | | |
| 2) <input type="checkbox"/> Change | <u>P</u> | <u>CELIS DE MOLINA, CARMEN R</u> | <u>5230 NW 83 RD COURT</u> |
| <input checked="" type="checkbox"/> Add | | | <u>DORAL FL 33166</u> |
| <input type="checkbox"/> Remove | | | |
| 3) <input type="checkbox"/> Change | | | |
| <input type="checkbox"/> Add | | | |
| <input type="checkbox"/> Remove | | | |
| 4) <input type="checkbox"/> Change | | | |
| <input type="checkbox"/> Add | | | |
| <input type="checkbox"/> Remove | | | |
| 5) <input type="checkbox"/> Change | | | |
| <input type="checkbox"/> Add | | | |
| <input type="checkbox"/> Remove | | | |
| 6) <input type="checkbox"/> Change | | | |
| <input type="checkbox"/> Add | | | |
| <input type="checkbox"/> Remove | | | |

E. If amending or adding additional Articles, enter change(s) here:
(Attach additional sheets, if necessary). (Be specific)

REMOVE: DAVILA MAURICIO: 6500 CYPRESS RD#404 PLANTATION, FL 33317

ADD: CELIS DE MOLINA, CARMEN R: 5230 NW 83 RD COURT DORAL FL 33166 / 100%

F. If an amendment provides for an 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)

08/01/2018

The date of each amendment(s) adoption: _____, if other than the date this document was signed.

08/01/2018

Effective date if applicable: _____
(no more than 90 days after amendment file date)

Note: If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as the document's effective date on the Department of State's records.

Adoption of Amendment(s) (CHECK ONE)

☒ The amendment(s) was/were adopted 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.

Dated 08/01/18

Signature [Signature]

(By a director, president or 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)

MAURICIO BAUMAR DAVILA
(Typed or printed name of person signing)

PRESIDENT
(Title of person signing)



FLORIDA DEPARTMENT OF STATE
DIVISION OF CORPORATIONS

**DISSOCIATION OR RESIGNATION OF PRESIDENT, VPRESIDENT FROM
FLORIDA
CORPORATIONS**

1. The name of the corporation as it appears on the records of the Florida Department of State is: **IRON PLUS 22 CORP.**
2. The Florida document/registration number assigned to corporation is: **P14000063781**
3. The date this president withdrew/resigned or will withdraw/resign is: **08/01/2018**
4. I, **DAVILA, MAURICIO B**, hereby withdraw/resign as a **PRESIDENT** of this corporation and affirm the corporation has been notified of my resignation in writing.

A handwritten signature in black ink, appearing to read "MD", enclosed within a large, horizontal oval shape.

Signature of Dissociating President