## P17000015724

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## COVER LETTER

TO: Amendment Section Division of Corporations

NAME OF CORPORA	TION: EPAFA INC		
DOCUMENT NUMBEI	0170	00015724	
The enclosed Articles of .	Amendment and fee are su	abmitted for filing.	
lease return all correspo	ndence concerning this ma	atter to the following.	
	JOSE FACUSEH /	ANDON	
		Name of Contact Perso	on
	EPAFA INC		
	· · · · · · · · · · · · · · · · · · ·	Firm Company	
	220 SW 136TH A	VΈ	
		Address	
	MIAMLEL, 33184		
		City State and Zip Coo	le
	info@audimeo.com		
	E-mail address: (to be us	sed for future annual repor	t notification)
for further information co	ncerning this matter, pleas		316 384 4053
Name of C	omact Person	Area Co	316 384 4053 ode & Daytime Telephone Number
nclosed is a check for the	: following amount made	payable to the Florida Dep	partment of State:
S35 Filling 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 fallahassee, FL 32314		Amend Divisio	Address diment Section on of Corporations entre of Tallahassee

## Articles of Amendment to Articles of Incorporation of

## EPAFA INC

(Name of Corporation as curr	rently filed with the Flor	ida Dept. of State)
P17000015724		
(Document Numb	ber of Corporation (if know	wn)
Pursuant to the provisions of section 607,1006, Florida Statutes, its Articles of Incorporation:	this Florida Profit Corpo	ration adopts the following amendment(s) to
A. If amending name, enter the new name of the corporation	<u>n:</u>	
name must be distinguishable and contain the word "corporation "Inc.," or Co.," or the designation "Corp.," "Inc.," or (Co., "chartered," "professional association," or the abbreviation "I	A professional corpo	
B. Enter new principal office address, if applicable:		70"
(Principal office address <u>MUST BE A STREET ADDRESS</u> )	<del></del>	<del></del>
C. Enter new mailing address, if applicable:		<u> </u>
(Mailing address MAY BE A POST OFFICE BOX)		
D. If amending the registered agent and/or registered office and new registered agent and/or the new registered office add Name of New Registered Agent		the name of the
(I-loral	la street address)	
New Registered Office Address:	<del></del>	Florida
	Сира	(Zip Code)
New Registered Agent's Signature, if changing Registered Agent the appointment as registered agent than Jamid.		ligations of the position
Signature of Ne	n Registered Agent if che	inging
Theck if applicable	, , , , ,	
$\square$ The amendment(s) is are being filed pursuant to s. 607.0120 (	11) (e), F.S	

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)

Example:

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

P. President V. Vice President, E. Treasurer, S. Secretary, D. Director, TR. Trustee, C. Chairman or Clerk, CLO., Chief Executive Officer, CLO., Chief Emancial 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 lasted 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 Doc, PT as a Change, Mike Jones. V as Remove, and Sally Smith, SV as an Add.

X Change	<u>14</u>	John Doe		
X Remove	<u>\</u>	Mike Jones		
$X \setminus X$ Add	<u>87.</u>	Sally Smith		
Type of Action (Check One)	Litle	<u>Name</u>	<u>Addres</u> s	
1)Change	D	PAOLA FACUSEH VELEZ	270 SE MIZNER BLVD STE 713	
X Add			BOCA RATON FL 33432	
Remove				
2) Change	D	ANDREA FACUSEH VELEZ	270 SE MIZNER BLVD STE 713	
X Add			BOCA RATON FL 33432	
Remove Change				
Add				
Remove				
1)Change	· · · · · · · · · · · · · · · · · · ·			
Add				
Remove				
O Change		-		
Add				
Remove				
o) Change				
Add				
Remove				

(Attach additiona	adding additional Ap d sheets, if nevessary	(Be specific)				
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%A						
				<del></del>		
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provisions for in	t provides for an exc uplementing the am	hange, reclassif endment if not a	ication, or cance contained in the :	llation of issued s amendment itself	shares. <u>'i</u>	
(И пов аручк	rable, indicate N=1)					
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<u> </u>		<u></u>				

The date of each amendment(s) adoption date this document was signed.	, if other than the
Effective date <u>if applicable</u> :	
	(no more than 90 days after amendment file date)
Note: If the date inserted in this block do document's effective date on the Departmen	s not meet the applicable statutory filing requirements, this date will not be listed as the tof State's records
Adoption of Amendment(s)	CHECK ONE)
The amendment(s) was were adopted by action was not required.	the incorporators, or board of directors without shareholder action and shareholder
'I The amendment(s) was were adopted by by the shareholders was were sufficient	the shareholders. The number of votes cast for the amendment(s) or approval.
☐ The amendment(s) was were approved be nust be separately provided for each vo	the shareholders through voting groups. The following statement ing group entitled to vote separately on the amendments:
"The number of votes east for the a	mendment(s) was were sufficient for approval
by	voting groups
ı	voting groups
07/22/2020 Dated	
	FACUSEH
selected, by an	esident or other officer – if directors or officers have not been neorporator – if in the hands of a receiver, trustee, or other court ary by that fiduciary)
JOSE F	ACUSEH ANDON
	(Typed or printed name of person signing)
PRESIC	ENT
	(Fitle of person signing)