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Division of Corporations

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COVER LETTER

TO: Amendment Sec Division of Corp	- -		
NAME OF CORPO	RATION:EAB MIAMI CO	RP.	
DOCUMENT NUM	BER: P18000056116		· · · · · · · · · · · · · · · · · · ·
The enclosed Articles	of Amendment and fee are st	abmitted for filing.	
Please return all corre	espondence concerning this ma	atter to the following:	
	LUCIA ESTRELLA	_	
		Name of Contact Perso	
	LICENSES & PERMITS		
		Firm/ Company	
	8300 WEST FLAGLER ST	The Company	
		Address	
	MIAMI, FL 33144		
		City/ State and Zip Cod	le
	LUCIAESTRELLA@BELL	SOUTH.NET	
	E-mail address: (to be u	sed for future annual report	notification)
For further information	n concerning this matter, plea	se call:	
LUCIA ESTRELLA		at (305	226-8727
Name	of Contact Person	Area Co	de & Daytime Telephone Number
Enclosed is a check for	or the following amount made	payable to the Florida Dep	artment of State:
\$35 Filing Fee	S43.75 Filing Fee & Certificate of Status	□\$43.75 Filing Foe & Certified Copy (Additional copy is enclosed)	S52.50 Filing Fee Certificate of Status Certified Copy (Additional Copy is enclosed)
	ling Address endment Section		Address ment Section
	sion of Corporations		n of Corporations
	Box 6327		entre of Tallahassee
Tall	ahassee, FL 32314		V. Monroe Street, Suite 810 ssee, PL 32303

Articles of Amendment to Articles of Incorporation of

~		1.16
EAB MIAMI CORP.		75.
(Name of Corporation as currently filed with	ih the Florida Dent. of State)	'3£
218000056116		jan jan
(Document Number of Corporat	ion (if known)	
ursuant to the provisions of section 607.1006, Florida Statutes, this Florida Pr	raffe Carranation admirate the fallow	
Articles of Incorporation:	oja corporation adopts the tottov	NIIR SINCHTHE
. If amending name, enter the new name of the corporation:		
The same of the top bot still the top bot still the		
		The new
ame must be distinguishable and contain the word "corporation," "company," Inc.," or Co.," or the designation "Corp," "Inc," or "Co". A profession chartered," "professional association," or the abbreviation "P.A."	or "incorporated" or the abbrevious or a corporation name must con-	stion "Corp.," tain the word
Enter new principal office address, if applicable: Principal office address MUST BE A STREET ADDRESS)		
	-	
Enter new mailing address, if applicable;		
(Malling address MAY BE A POST OFFICE BOX)		
	· · · · · · · · · · · · · · · · · · ·	
	· · · · · · · · · · · · · · · · · · ·	
. If amending the registered agent and/or registered office address in Flor	rida, 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:	, Florida	
(Ctry)		Code)
,		
• • • • • • • • • • • • • • • • • • •		
ew Registered Agent's Signature, if changing Registered Agent:		
ereby accept the appointment as registered agent. I am familiar with and acc	cept the obligations of the position.	•
Signature of New Registered Ap	gent, if changing	_
	, , , , , ,	
heck if applicable The amendment(s) is/are being filed pursuant to s. 607 0120 (11) (e). E.S.		
. The anequalential wate being bien bittions in C 607 01707111(6) 🕨 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)

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	PI	John Doe	
X Remove	<u>v</u>	Mike Jones	
_X Add	<u>\$Υ</u>	Sally Smith	
Type of Action (Check One)	<u>Title</u>	Name	<u>Addres</u> s
1)Change	DIR	AGUIRRE, JAIME	2726 SW 131ST PLACE
X Add			MIAMI, FL 33175
Remove			
2) Change			
Add			
Remove 3) Change			
Add			
Remove			
4)Change			
Add			
Remove			
5) Change			
Add			
Remove			
6) Change			
Add			
Remove			

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	12/14/2021	
The date of each amendment		, if other than the
date this document was signed	•	
	12/14/2021	
Effective date if applicable:		
	(no more than 90 days after amendment file date)	
	this block does not meet the applicable statutory filing requirements, this date will be Department of State's records.	not be listed as the
Adoption of Amendment(s)	(CHECK ONE)	
The amendment(s) was/wer action was not required.	e adopted by the incorporators, or board of directors without shareholder action and	shareholder
☐ The amendment(s) was/wer by the shareholders was/we	e adopted by the shareholders. The number of votes cast for the amendment(s) are sufficient for approval.	
must be separately provide	e approved by the shareholders through voting groups. The following statement d for each voting group entitled to vote separately on the amendment(s):	2021 DEC
"The number of votes	cast for the amendment(s) was/were sufficient for approval	C 15 ASSEE
by	,"	me _ [
•	(voting group)	무섭 그 그 그 그 그 그 그 그 그 그 그 그 그 그 그 그 그 그 그
12/14/ Dated Signature		AII 10: 44 OF STATE FLORIDA
scl	y a director, president or other officer - if directors or officers have not been ected, by an incorporator - if in the hands of a receiver, trustee, or other court pointed fiduciary by that fiduciary)	-
	ERNESTO AMADOR	
	(Typed or printed name of person signing)	
	PRESIDENT	
	(Title of person signing)	