

P180000089019

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Division of Corporations

02/05/17 p.m.

12-10-2018

Florida Department of State
Division of Corporations
Electronic Filing Cover Sheet

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To:

Division of Corporations
Fax Number : (850) 617-6380

From:

Account Name : GENERAL SOLUTIONS INC
Account Number : 120140000086
Phone : (305) 255-3310
Fax Number : (305) 255-3320

Amend

DEC 11 2018

LALBRITTON

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

Email Address: blanca@general-solutionsinc.com

COR AMND/RESTATE/CORRECT OR O/D RESIGN
PROGAN CARIBBEAN CORP.

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December 10, 2018

FLORIDA DEPARTMENT OF STATE
Division of Corporations

PROGAN CARIBBEAN CORP.
1120A COLETTA DR., SUITE 202
ORLANDO, FL 32807

SUBJECT: PROGAN CARIBBEAN CORP.
REF: P18000089019

We received your electronically transmitted document. However, the document has not been filed. Please make the following corrections and refax the complete document, including the electronic filing cover sheet.

The current name of the entity is as referenced above. Please correct your document accordingly.

Period after (CORP).

If you have any questions concerning the filing of your document, please call (850) 245-6050.

Irene Albritton
Regulatory Specialist II

FAX Aud. #: H18000346918
Letter Number: 318A00025293



December 7, 2018

FLORIDA DEPARTMENT OF STATE
Division of Corporations

PROGAN CARIBBEAN CORP.
13205 SW 137TH AVENUE STE 113
MIAMI, FL 33186

SUBJECT: PROGAN CARIBBEAN CORP.
REF: P18000089019

We received your electronically transmitted document. However, the document has not been filed. Please make the following corrections and refax the complete document, including the electronic filing cover sheet.

Please check the appropriate box on the amendment form regarding the adoption of the amendment(s).

CHECK ONLY ONE BOX

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6050.

Shelia H Young
Regulatory Specialist II

FAX Aud. #: H18000346918
Letter Number: 518A00025165

H180003469183

Articles of Amendment
to
Articles of Incorporation
of
PROGAN CARIBBEAN CORP.

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

PI8000089019

(Document Number of Corporation (if known))

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:

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)

13205 SW 137TH AVE SUITE 113

MIAMI FL 33186

C. Enter new mailing address, if applicable:
(Mailing address MAY BE A POST OFFICE BOX)

13205 SW 137TH AVE SUITE 113

MIAMI FL 33186

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 ANDRES GIRALDO

13205 SW 137TH AVE SUITE 113

(Florida street address)

New Registered Office Address: MIAMI, Florida 33186

(City)

(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

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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:

☒ Change PT John Doe

☒ Remove V Mike Jones

☒ Add SV Sally Smith

Type of Action (Check One)	Title	Name	Address
1) <input type="checkbox"/> Change	_____	_____	_____
<input type="checkbox"/> Add			_____
<input type="checkbox"/> Remove			_____
2) <input type="checkbox"/> Change	_____	_____	_____
<input type="checkbox"/> Add			_____
<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			_____

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11/10/2018 11:11:11

The date of each amendment(s) adoption: 12/05/2018, if other than the date this document was signed.

Effective date if applicable: 12/06/2018
(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 12/05/2018
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)

ANDRES GIRALDO

(Typed or printed name of person signing)

PRESIDENT

(Title of person signing)

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