P900064997

(Req	uestor's Name)	
(Add	ress)	
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(Addi	ress)	
(City/	State/Zip/Phon	e #)
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PICK-UP	■ WAIT	MAIL
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(500)	mess Entity Na	me)
(Doc	ument Number)
Certified Copies	Certificate	s of Status
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SEP 0 6 2019 S. YOUNG 109 SEP -6 PK 3 08

COVER LETTER

TO: Amendment Section Division of Corporations

NAME OF CORPOR	ATION: FAMILIAS LAS F	FUENTES CORP	
DOCUMENT NUMB	D10000064007		
The enclosed Articles of	of Amendment and fee are su	bmitted for filing.	
Please return all corres	pondence concerning this ma	tter to the following:	
	Alex Pina		
-		Name of Contact Person	
	Alex Pina co.		
-		Firm/ Company	
:	8400 NW 36TH ST STE 450	•	
-	Address		
1	DORAL, FL 33166		
•		City/ State and Zip Code	;
client	@alexpina.co		
	•	sed for future annual report	notification)
			,
For further information	concerning this matter, pleas	se call:	
Alex Pina		at (⁸⁴⁴	941-1120
Name o	f Contact Person	Area Coo	le & Daytime Telephone Number
Enclosed is a check for	the following amount made	payable to the Florida Depar	rtment 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)
Ame Divis P.O.	ing Address ndment Section tion of Corporations Box 6327 hassee, FL 32314	Amendi Division Clifton 2661 Er	Address ment Section n of Corporations Building xecutive Center Circle ssee, FL 32301

Articles of Amendment to Articles of Incorporation of

FAMILIAS LAS FUENTES CORP

(Name of Corporation	on as currently filed with the Florida Dept. of S	State)	
P19000064997			
(Docum	nent Number of Corporation (if known)		
Pursuant to the provisions of section 607.1006, Florida its Articles of Incorporation:	a Statutes, this Florida Profit Corporation adopts	the following amendment	t(s) t
A. If amending name, enter the new name of the co	orporation:		
		Thenew	
name must be distinguishable and contain the word "Corp.," "Inc.," or Co.," or the designation "Corp.			
word "chartered," "professional association," or the		The manufacture of the second	٦,
, , , , , , , , , , , , , , , , , , , ,		S. T.	
B. Enter new principal office address, if applicable		<u> </u>	. 1
(Principal office address <u>MUST BE A STREET ADD</u>	<u>ORESS</u>)		!
			,
		<u>မြော်</u> မှာ	
		9	
C. Enter new mailing address, if applicable:			
(Mailing address <u>MAY BE A POST OFFICE BO</u>	<u>X</u>)		
			
D. If amending the registered agent and/or register		the	
new registered agent and/or the new registered	office address:		
Name of New Registered Agent			
- Tallyto of the Tallyton			
	(Florida street address)		
New Registered Office Address:	. Flor	rida	
Ten magnitude office material.	(City)	(Zip Code)	
	•,		
Naw Pagistared Agent's Signature if shaming Desi			
New Registered Agent's Signature, if changing Regil hereby accept the appointment as registered agent.		he nosition	
and the second of the second o	- am jammar min ana accept me oonganons of th	ic position.	
			
Signa	ature 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.

X Change	<u>PT</u>	John Doe	
X Remove	<u>v</u>	Mike Jones	
X Add	<u>sv</u>	Sally Smith	
Type of Action (Check One)	<u>Title</u>	<u>Name</u>	<u>Addres</u> s
1) Change	P	Johanna Anez De Gonzalez - Pres.	7910 NW 25TH ST
X Add			
Remove			DORAL, FL 33122
2) X Change	VP	Fabiana C Anez Leonardi - VP	7910 NW 25TH ST
Add			
Remove			DORAL, FL 33122
3) Change			
Add			
Remove			
4) Change			
Add			
Remove			
5) Change			
Add			
Remove			
6) Change			
Add			
Remove			

(Attach additional sheets, if necessary).	(Be specific)
so update EIN: 61-1942356	
	
	-
If an amond-word	
provisions for implementing the ame	hange, reclassification, or cancellation of issued shares, endment if not contained in the amendment itself:
(if not applicable, indicate N/A)	
	

	s) adoption:	, if other than the
date this document was signed.		
Effective date if applicable:	<u> </u>	
	(no more than 90 days after amendment file date)	
	nis block does not meet the applicable statutory filing requirements, this date Department of State's records.	e will not be listed as the
Adoption of Amendment(s)	(CHECK ONE)	
The amendment(s) was/were by the shareholders was/we	e adopted by the shareholders. The number of votes cast for the amendment(s) re sufficient for approval.	•
	e approved by the shareholders through voting groups. The following statement for each voting group entitled to vote separately on the amendment(s):	11
"The number of votes	cast for the amendment(s) was/were sufficient for approval	
by	(voting group)	
	(voting group)	
The amendment(s) was/were action was not required.	adopted by the board of directors without shareholder action and shareholder	-
☐ The amendment(s) was/were action was not required.	e adopted by the incorporators without shareholder action and shareholder	
09/05/1 Dated		
Signature	Farmund voz	
sel	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)	
	Fabiana C Anez Leonardi	
	(Typed or printed name of person signing)	
	Vice President	

(Title of person signing)