Note: Please print this page and use it as a cover sheet. Type the fax audit number (shown below) on the top and bottom of all pages of the document.

(((H210003171693)))



H210003171693ABC/

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To:

Division of Corporations

Fax Number

: (850)617-6380

From:

Account Name : LAMADRID FINANCIAL SERVICES CORP

Account Number : 120200000059 Phone : (954)727-9771

Fax Number : (954)727-9773

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

Email Address:

COR AMND/RESTATE/CORRECT OR O/D RESIGN

ACCENT PROTECTION GROUP CORP

Certificate of Status	0
Certified Copy	0
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Estimated Charge	\$35.00

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221 AUG 24 PH 15

2415 N. Monroe Street, Suite 810

Tallahassee, FL 32303

Tallahassee, FL 32314

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COVER LETTER

TO: Amendment Section Division of Corporations

NAME OF CORPOR	ACCENT PROTEC	TION GROUP CORP		
DOCUMENT NUME	P20000036977			
	of Amendment and fee are sub	omitted for filing.		
Please return all corres	pondence concerning this mat	ter to the following:		
	ALEXIS LAMADRID		·	
	Name of Contact Person			
	LAMADRID FINANCIAL SERVICES CORP			
	<u> </u>	Firm/ Company		
	1267 S PINE ISLAND RD			
	Address			
	PLANTATION, FL 33324			
City/ State and Zip Code				
	ALEXIS.LAMADRID@HRI	BLOCK.COM		
	E-mail address: (to be us	ed for future annual report	notification)	
For further informatio	n concerning this matter, pleas	e call:		
ALEXIS LAMADRID		at (⁹⁵⁴	727-9771 de & Daytime Telephone Number	
Name	of Contact Person	Area Coo	de & Daytime Telephone Number	
Enclosed is a check for	or the following amount made	payable to the Florida Dept	artment of State:	
\$35 Filing Fcc	☐\$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)	
Am Div	Iling Address endment Section ision of Corporations Box 6327	Amend Divisio	Address Iment Section on of Corporations entre of Tallahassee	

Articles of Amendment to Articles of Incorporation of

ACCENT PROTECTION GROUP CORP	
(Name of Corporation as current)	y filed with the Florida Dept. of State)
P20000036977	
(Document Number o	f Corporation (if known)
Pursuant to the provisions of section 607.1006, Florida Statutes, this its Articles of Incorporation:	Florida Profit Corporation adopts the following amendment(s) to
A. If amending name, enter the new name of the corporation:	
	The new
name must be distinguishable and contain the word "corporation," "Inc.," or Co.," or the designation "Corp," "Inc," or "Co". I chartered," "professional association," or the abbreviation "P.A."	company," or "incorporated" or the abbreviation "Corp.," A professional corporation name must contain the word
B. Enter new principal office address, if applicable:	
(Principal office address MUST BE A STREET ADDRESS)	
	24 PH 2: 39
C. Enter new mailing address, if applicable:	ယ
(Mailing address MAY BE A POST OFFICE BOX)	
D. If amending the registered agent and/or registered office add new registered agent and/or the new registered office address	ress in Florida, enter the name of the
new registered agent and/or the new registered office address	<u> </u>
Name of New Registered Agent	
(Florida st	reet address)
New Registered Office Address:	, Florida
	(City) (Zip Code)
New Registered Agent's Signature, if changing Registered Agen I hereby accept the appointment as registered agent. I am familiar	t: with and accept the obligations of the position.
Signature of New	Registered Agent, if changing
Signature of New 1	TOPHIOLOGIA MEDINA, IL ONGINANIA
Check if applicable	

☐ 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; 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	Rolando Gil	4022 ESTEPONA AVE
Add	-		DORAL, FL 33178
X Remove			
2) Change	p	Miguel Valdueza Guadarrama	4022 ESTEPONA AVE
Add		·	DORAL FL 33178
Remove 3)Change	vp	Domingo Morales	4022 ESTEPONA AVE
Add			DORAL, FL 33178
X Remove	_	n I. I. 01	AAAA MATTADANIA ANIE
4) Change	D ——	Rolando Gil	4022 ESTEPONA AVE
X Add			DORAL, FL 33178
Remove	VP	Miguel Valdueza Guadarrama	4022 ESTEPONA AVE
5) Change X Add			DORAL, FL 33178
			·
Remove 6) Change	P	Domingo Morales	4022 ESTEPONA AVE
X Add			DORAL, FL 33178
Remove			•

E. If amending or adding additional Articles, enter change(s) here: (Attach additional sheets, if necessary). (Be specific)
THE CORPORATION HAS DECIDED TO HAVE SHARE DISTRIBUTED AS FOLLOW:
ROLANDO GIL WILL BE HOLDING THE 5% OF SHARES
MIGUEL VALDUEZA GUADARRAMA WILL BE HOLDING THE 5% OF SHARES
DOMINGO MORALES WILL BE HOLDING THE 90% OF SHARES
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)

The date of each amendment(s) a	doption:	, if other than the
ate this document was signed.	•	
Effective date <u>if applicable</u> :		
	(no more than 90 days after amendment file date)	
Note: If the date inserted in this to ocument's effective date on the De	lock does not meet the applicable statutory filing requirements, this spartment of State's records.	date will not be listed as the
Adoption of Amendment(s)	(CHECK ONE)	
The amendment(s) was/were adaction was not required.	opted by the incorporators, or board of directors without shareholder a	ction and shareholder
■ The amendment(s) was/were adby the shareholders was/were st	opted by the shareholders. The number of votes cast for the amendment ifficient for approval.	nt(s)
	proved by the shareholders through voting groups. The following state each voting group entitled to vote separately on the amendment(s):	ment
"The number of votes east	for the amendment(s) was/were sufficient for approval	
by	, n	
	(voting group)	
AUGUST	24, 2021	
DatedSignature	I fraals	
(By a c selecte	irector, president or other officer - if directors or officers have not been d, by an incorporator - if in the hands of a receiver, trustee, or other conted fiduciary by that fiduciary)	ourt
	DOMINGO MORALES	
	(Typed or printed name of person signing)	
	PRESIDENT	
	(Title of person signing)	<u> </u>