

11/23/21, 8:57 AM

Division of Corporations

Florida Department of State
 Division of Corporations
 Electronic Filing Cover Sheet

P210004312383

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.

(((H21000431238 3)))



H21000431 2383ABCY

Note: DO NOT hit the REFRESH/RELOAD button on your browser from this page. Doing so will generate another cover sheet.

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

From:
 Account Name : RASCO KLOCK PEREZ & NIETO, P.L.
 Account Number : 104076000124
 Phone : (305)476-7100
 Fax Number : (305)476-7102

FILED
 2021 NOV 23 AM 9:47
 STATE OF FLORIDA

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

Email Address: abazo@rascoklock.com

2021 NOV 23 PM 10:05
 58:01:11
 02:11:20Z

**COR AMND/RESTATE/CORRECT OR O/D RESIGN
 LOS LOMAJES INVESTMENTS INC.**

Certificate of Status	0
Certified Copy	0
Page Count	06
Estimated Charge	\$35.00

NOV 24 2021
S. PRATHER

[Electronic Filing Menu](#)

[Corporate Filing Menu](#)

[Help](#)

COVER LETTER

TO: Amendment Section
Division of Corporations

NAME OF CORPORATION: LOS LOMAJES INVESTMENTS

DOCUMENT NUMBER: P21000094989

The enclosed *Articles of Amendment* and fee are submitted for filing.

Please return all correspondence concerning this matter to the following:

ANDRES BAZO
Name of Contact Person

RASCO KLOCK PEREZ NIETO PL
Firm/ Company

2555 PONCE DE LEON BLVD SUITE 600
Address

CORAL GABLES
City/ State and Zip Code

ABAZO@RASCOKLOCK.COM
E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

ANDRES BAZO at (305) 4767100
Name of Contact Person Area Code & Daytime Telephone Number

Enclosed is a check for the following amount made payable to the Florida Department 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)

Mailing Address
Amendment Section
Division of Corporations
P.O. Box 6327
Tallahassee, FL 32314

Street Address
Amendment Section
Division of Corporations
The Centre of Tallahassee
2415 N. Monroe Street, Suite 810
Tallahassee, FL 32303

Articles of Amendment
to
Articles of Incorporation
of

LOS LOMAJES INVESTMENTS INC

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

P21000094989

(Document Number of Corporation (if known))

FILED
2021 NOV 23 AM 9:47
STATE
FLORIDA

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)

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

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 _____

(Florida street address)

New Registered Office Address: _____, Florida _____
(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.

Check if applicable

The amendment(s) is/are being filed pursuant to s. 607.0120 (11) (e), F.S.

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

Effective date if applicable: _____
(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 incorporators, or board of directors without shareholder action and shareholder action was not required.
- 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)

11/19/2021
Dated _____

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)

TRANSWORLD BUSINESS MANAGEMENT, LLC- INCORPORATOR

(Typed or printed name of person signing)

MANAGER OF INCORPORATOR

(Title of person signing)

FILED
2021 NOV 23 AM 9:47
STATE OF FLORIDA