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## **COVER LETTER**

TO: Amendment Section Division of Corporations

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NAME OF CORI	PORATION: FLSARO 1 CORP.				
DOCUMENT NU	MBER: 1222000045248	<u> </u>			
	des of Amendment and fee are sul	bmitted for filing.			
Please return all co	prespondence concerning this ma	tter to the following:			
	Isabel Aninat				
	Name of Contact Person				
	n/a				
		Firm/ Company			
	848 Brickell Avenue, Suite 830				
	Address Miami, FL 33131				
	City/ State and Zip Code				
	ianinat@bruzzoneygonzalez.com				
	E-mail address: (to be used for future annual report notification)				
For further inform	ation concerning this matter, plea	se call:			
Isabel Aninat		at ( <u>786</u>	302 7279		
Na	me of Contact Person	Area Code & Daytime Telephone Number			
Enclosed is a chec	k for the following amount made	payable to the Florida Dep.	artment of State:		
<b>\$</b> 35 Filing Fo	e ☐\$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		Ameno Divisio The C	Address Intent Section on of Corporations entre of Tallahassee N. Monroe Street, Suite 810		

Tallahassee, FL 32303

## Articles of Amendment to Articles of Incorporation of

Filed

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(Na of C		Scer	
( <u>Name or v</u>	orporation as currentl	ly filed with the Florida Dept. of State) TALL AHASSEE, F	
122000045248			
	(Document Number o	of Corporation (if known)	
tursuant to the provisions of section $607.106$ s. Articles of Incorporation:	06, Florida Statutes, this	Florida Profit Corporation adopts the following amendment(s) t	
. If amending name, enter the new name	e of the corporation:		
Ñ⁄A		The new	
ane must be distinguishable and contain the Inc., " or Co.," or the designation "Corp chartered," "professional association," or	n," "Inc," or "Co". 🧳	company," or "incorporated" or the abbreviation "Corp.," A professional corporation name must contain the word 	
I. Enter new principal office address, if a	ipplicable:	n/a	
Principal office address <u>MUST BE A STR</u>			
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)		848 Brickell Avenue, Suite 830	
		Miami, FL 33131	
<ol> <li>If amending the registered agent and/onew registered agent and/or the new registered.</li> </ol>	or registered office address	ress in Florida, enter the name of the	
Is	abel Aninat	<u></u>	
Name of New Registered Agent			
<u> </u>	48 Brickell Avenue, Suit		
	•	reet address)	
	liami	. Florida 33131	
New Registered Office Address; M		(City) (Zip Code)	

Check if applicable

<sup>☐</sup> 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)

Please note the officer/director title by the first letter of the office title:

P - President; W= 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	<u>PT</u>	John Doc	
X Remove	<u>v</u>	Mike Jones	
_X Add	<u>sv</u>	Sally Smith	
Type of Action (Check One)	Title	Name	Address
1) \(\frac{\lambda}{\}\) Change	PD	Juan Carlos C. Saffie Robertson	848 Brickell Avenue, Suite 830
Add			Miami, FL 33131
Remove			
2) X Change	VD	Juan Carlos Saffie Duery	848 Brickell Avenue, Stitte 830
Add			Miami, FL 33131
Remove 3) Change			
Add			
Remove			
4)Change			
Add			
Remove			
5) Change	<u></u>		
Add			
Remove			
6)Change			
Add			
Remove			

E. If amending or adding additional Articles, enter change(s) here: (Attach additional sheets, if necessary). (Be specific)
Bylaws and Amendment of Bylaws. The incorporators or board of directors shall adopt the initial bylaws for the corporation
Following adoption of the initial bylaws, unless otherwise required by mandatory provisions of the Florida Business Corpor-
ation Act or other Applicable Law, the shareholders shall have the exclusive power to amend and/or repeal the initial bylaws
and/or adopt new bylaws.
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) N/A

The date of each amendment(s) add	ption;	, if other than the
date this document was signed.		
Effective date if applicable:	(no more than 90 days after amendment file date)	
	(no more than 91) days after amenament file date)	
Note: If the date inserted in this blo document's effective date on the Dep	ack does not meet the applicable statutory filling requirements, this drartment of State's records.	ite will not be listed as the
Adoption of Amendment(s)	(CHECK ONE)	
The amendment(s) was/were adopted action was not required.	sted by the incorporators, or board of directors without shareholder acti	on and shareholder
The amendment(s) was/were adopty the shareholders was/were suf-	oted by the shareholders. The number of votes cast for the amendment ficient for approval.	(s)
☐ The amendment(s) was/were app must be separately provided for	roved by the shareholders through voting groups. The following statem each voting group entitled to vote separately on the amendment(s):	ent
"The number of votes cast	for the amendment(s) was/were sufficient for approval	
by	<u></u>	
s, <u> </u>	(voting group)	
Dated	NA 00/08/2022	
C:	MAN	
(By a d	actor, president or other officer – if directors or officers have not been	
selecte	an incorporator - if in the hands of a receiver, trustee, or other cou	ın
арроги	id fiduciary by that fiduciary)	
	Juan Carlos C. Saffie Robertson	
	(Typed or printed name of person signing)	
	President	
	(Title of person signing)	

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