P00000106997

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Special Instructions to	Filing Officer:	
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COVER LETTER

TO: Amendment Section Division of Corporations

NAME OF COF	RPORATION: LUIS PEREZ GAL	ERIA INC	
DOCUMENT N	UMBER: P00000106997		
	icles of Amendment and fee are su	bmitted for filing.	
Please return all o	correspondence concerning this ma	tter to the following:	
	HILDA FAZ		
		Name of Contact Person	n
	LUIS PEREZ GALERIA INC		
		Firm/ Company	
	2715 TIGERTAIL AVENUE		
		Address	· · · · · · · · · · · · · · · · · · ·
	MIAMI FL 33133		
	· · · · · · · · · · · · · · · · · · ·	City/ State and Zip Cod	e
	HILDA@LUISPEREZGALE	RIA.COM	
	E-mail address: (to be us	ed for future annual report	notification)
For further inform	nation concerning this matter, pleas	786	280-1732
	ame of Contact Person	at (at Co	de & Daytime Telephone Number
	ck for the following amount made p		,
■ \$35 Filing Fo	ee S43.75 Filing Fee & Certificate of Status	□\$43.75 Filing Fee & Certified Copy (Additional copy is enclosed)	S52.50 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	Amend Division The C 2415 I	Address Iment Section on of Corporations entre of Tallahassee N. Monroe Street, Suite 810 assee, FL 32303

Articles of Amendment to Articles of Incorporation of

LUIS PEREZ GALERIA INC	•			
(<u>Name</u>	of Corporation as curren	tly filed with the Florida Dept. of State)		
P00000106997				
	(Document Number	of Corporation (if known)		
Pursuant to the provisions of section 607 its Articles of Incorporation:	.1006, Florida Statutes, this	s Florida Profit Corporation adopts the follow	ing amei	ndment(s) to
A. If amending name, enter the new n	ame of the corporation:			
			The	new
	Corp, " "Inc," or "Co".	"company," or "incorporated" or the abbrevia A professional corporation name must conto "	tion "Co	rp.,"
B. Enter new principal office address,				
(Principal office address <u>MUST BE A S</u>	TREET ADDRESS)	:: :::::::::::::::::::::::::::::::::::	2077	
			SEI	-13
				Carries Carries
C. Enter new mailing address, if appl		AS:	 T=	77
(Mailing address <u>MAY BE A POST</u>	<u>OFFICE BOX</u>)		<u>₹</u>	
				
			ယ 	
D. If amending the registered agent ar	nd/or revistered office add	dress in Florida, enter the name of the		
new registered agent and/or the new				
Name of New Registered Agent	HILDA FAZ			
,	2715 TIGERTAIL AVE	SUITE 302	_	
	(Florida s	treet address)	_	
New Registered Office Address:	MIAMI	Florida		
	•	(City) (Ziq	o Code)	
New Registered Agent's Signature, if c I hereby accept the appointment as regist		it: with and accept the obligations of the position		
	^	, 3		
	. N. 2- D. C.	2		
	Signatura	Printinged doors if abouting	_	
	SINNAIN C OF DUA	NOTAGE CONTROL O CHANCELLY		

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)

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>	Name	Address
1) X Change	P	HILDA FAZ	2715 TIGERTAIL AVE 302
Add			MIAMI FL 33133
Remove			
2) Change			
Add			
Remove 3) Change			
Add			
Remove			
4) Change			
Add			
Remove			
5) Change			
Add			
Remove			
6) Change			
Add			
Remove			

E. If amending or adding additional Articles, enter change(s) here:
(Attach additional sheets, if necessary). (Be specific)
LEGAL NAME CHANGE FROM AURA HILDA MOLANO DE PEREZ TO HILDA FAZ -REMAIN AS PRESIDENT

<u> </u>
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) adoption:date this document was signed.	if other than the
Effective date <u>if applicable</u> :	
(no mo	re than 90 days after amendment file date)
Note: If the date inserted in this block does not meet the document's effective date on the Department of State's results.	he applicable statutory filing requirements, this date will not be listed as the ecords.
Adoption of Amendment(s) (CHECK O	<u>NE</u>)
■ The amendment(s) was/were adopted by the incorpor action was not required.	ators, or board of directors without shareholder action and shareholder
☐ The amendment(s) was/were adopted by the sharehol by the shareholders was/were sufficient for approval.	ders. The number of votes cast for the amendment(s)
☐ The amendment(s) was/were approved by the shareho must be separately provided for each voting group en	
"The number of votes east for the amendment(s) was/were sufficient for approval
by	<u></u> .
(voting group	o)
08/30/2022 Dated	
Signature	lafar Der migrafuse
(By a director, president or o	ther officer of directors or officers have not been
	if in the hands of a receiver, trustee, or other court iduciary)
AURA HILDA MO	printed name of person signing)
(Typed or	printed name of person signing)
PRESIDENT	
(Title of	person signing)

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