P07000004203

(Re	questor's Name)	
(Ad	dress)	
(Ad	dress)	
(Cit	y/State/Zip/Phone	e #)
PICK-UP	☐ WAIT	MAIL
(Bu	siness Entity Nan	ne)
(Do	cument Number)	
Certified Copies	Certificates	s of Status
Special Instructions to	Filing Officer:	
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SECRETARY OF STA

RECEIVED

A. RAMSEY MAY 3 1 2023

CAPITAL CONNECTION, INC.
417 E. Virginia Street, Suite 1 - Tallahassee, Florida 32301
(850) 224-8870 - 1-800-342-8062 - Fnx (850) 222-1222

19TH AVE INVES	TMENT GROUP INC	
Please Debit I20000	0000257 For: 35	
Thank you Seth Nee	eiey	
Staf		Art of Inc. File
		LTD Partnership File
		Foreign Corp. File
		L.C. File
		Fictitious Name File
		Trade/Service Mark
		Merger File
		Art, of Amend, File
		RA Resignation
		Dissolution / Withdrawal
		Annual Report / Reinstatement
		Cert. Copy
		Рhого Сору
		Certificate of Good Standing
		Certificate of Status
		Certificate of Fictitious Name
		Corp Record Search
/ .		Officer Search
1	7/	Fictitious Search
Signature	,	Fictitious Owner Search
Signature //		Vehicle Search
		Driving Record
Requested by: SETH	05/26	UCC 1 or 3 File
Name	Date Time	UCC 11 Search
14dHIC	Date Time	UCC 11 Retrieval
Walk-In	Will Pick Up	Courier

COVER LETTER

TO: Amendment Section
Division of Corporations

NAME OF CORPOR	ATION: 19TH AVE INVES	TMENT GROUP INC			
DOCUMENT NUMB	ER: P07000004203				
	of Amendment and fee are sub	omitted for filing.			
Please return all corresp	pondence concerning this mat	ter to the following:			
	Julio R. Iriarte				
-	<u> </u>	Name of Contact Person			
	19TH AVE INVESTMENT	GROUP INC			
-		Firm/ Company			
	5767 N.W. 151 Street, Unit C	• •			
-	Address				
	Miami Lakes, FL 33014				
•		City/ State and Zip Code	 ;		
	jiriarte@leadingpa.com				
-	E-mail address: (to be us	ed for future annual report	notification)		
For further information	concerning this matter, pleas	se call:			
Julio Iriarte		at (528-6998		
Name o	f Contact Person	Area Co	de & Daytime Telephone Number		
Enclosed is a check for	the following amount made	payable to the Florida Depa	artment of State:		
S35 Filing Fee	S43.75 Filing Fee & Certificate of Status	S43.75 Filing Fee & Certified Copy (Additional copy is enclosed)	S52.50 Filing Fee Certificate of Status Certified Copy (Additional Copy is enclosed)		
Ame Divi P.O.	ing Address indment Section sion of Corporations Box 6327 thassee, FL 32314	Amend Division The Co 2415 N	Address Iment Section In of Corporations entre of Tallahassee N. Monroe Street, Suite 810 assee, FL 32303		

Articles of Amendment to Articles of Incorporation of

FILED

2023 HAY 30 AM 10: 40

19TH AVE INVESTMENT GROUP INC

(<u>N</u> ame	of Corporation as curren	tly filed with the Florida Dept: of State	
P07000004203		model (min	
	(Document Number	of Corporation (if known)	
Pursuant to the provisions of section 607 ts Articles of Incorporation:	.1006, Florida Statutes, this	s Florida Profit Corporation adopts the following amendment(
a. If amending name, enter the new n	ame of the corporation:		
ame must be distinguishable and contain Inc.," or Co.," or the designation "(chartered," "professional association,	Corp," "Inc," or "Co".	The new "company," or "incorporated" or the abbreviation "Corp.," A professional corporation name must contain the word	
B. Enter new principal office address, if applicable:		5767 N.W. 151 Street	
Principal office address MUST BE A S		Unit C-2	
		Miami Lakes, FL 33014	
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)		5767 N.W. 151 Street	
		Unit C-2	
		Miami Lakes, FL 33014	
. If amending the registered agent an new registered agent and/or the ne	nd/or registered office add w registered office addres	iress in Florida, enter the name of the	
Name of New Registered Agent	Julio R. Iriarte	-	
	5767 N.W. 151 Street, Unit C-2		
	(Florida si	reet address)	
New Registered Office Address:	Miami Lakes	Florida 33014	
ivew Registerea Office Address:		(City) (Zip Code)	

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.

Example:

A Change	1	John Dae	
X Remove	<u>v</u> .	Mike Jones	
<u>X</u> Add <u>S</u>	<u>sv</u>	Sally Smith	
Type of Action (Check One)	<u>Title</u>	<u>Name</u>	<u>Addres</u> s
1) Change	P	Miguel A. Perez	13791 N.W. 19 Avenue, Bay 1
Add			Opa Locka, FL 33054
X Remove			
2) Change	VP	Miguel A. Perez	13791 N.W. 19 Avenue, Bay 1
Add			Opa Locka, FL 33054
X Remove Change	P	Julio R. Iriarte	5767 N.W. 151 Street, Unit C-2
X Add			Miami Lakes, FL 33014
Remove			
4) Change			
Add			
Remove			
5) Change			
Add			
Remove			
5) Change			
Add			
Remove			

Attach additional sheets, if necessar	ry). (Be specific)
	
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f an amendment provides for an e	exchange, reclassification, or cancellation of issued shares,
provisions for implementing the a	amendment if not contained in the amendment itself:
(if not applicable, indicate N/A)	
	
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UNIE INIC NACIMENT TORE CLOBER	doption:, if other than the
date this document was signed. Ma	y 1, 2023
Effective date if applicable:	(no more than 90 days after amendment file date)
Note: If the date inserted in this t document's effective date on the D	block does not meet the applicable statutory filing requirements, this date will not be listed as the partment of State's records.
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 action and shareholder
☐ The amendment(s) was/were adby the shareholders was/were so	opted by the shareholders. The number of votes cast for the amendment(s) ifficient for approval.
must be separately provided for	proved by the shareholders through voting groups. The following statement each voting group entitled to vote separately on the amendment(s): for the amendment(s) was/were sufficient for approval
the named of foles east	tot the amendment(3) was were surretent tot approval
hv	**
by	(voting group)
Dated May 1, 202	el Perez.
Dated May 1, 202 Dated Migual Per Signature (By a d selecte	
Dated May 1, 202 Dated Migual Per Signature (By a d selecte	el Perez 22 (May 1, 2023 12:10 EDT) 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 court
Dated May 1, 202 Dated Migual Per Signature (By a d selecte	el Perez Est (May 1, 2003 12:10 EDT) 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 court ted fiduciary by that fiduciary)
Dated May 1, 202 Dated Migual Per Signature (By a d selecte	Perez (c) Perez (c) Perez (c) (May 1, 2003 12:10 EDD) (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 court (ed fiduciary by that fiduciary) Miguel A. Perez

COVER LETTER

TO: Amendment Section
Division of Corporations

NAME OF CORPO	RATION: 19TH AVE INVES	TMENT GROUP INC	
DOCUMENT NUM	BER: P07000004203		
	of Amendment and fee are sub	omitted for filing.	
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	Julio R. Iriarte		
		Name of Contact Person	
	19TH AVE INVESTMENT	GROUP INC	
		Firm/ Company	
	5767 N.W. 151 Street, Unit C	:-2	
		Address	
	Miami Lakes, FL 33014		
		City/ State and Zip Code	:
	jiriarte@leadingpa.com		
	E-mail address: (to be us	ed for future annual report	notification)
For further information	on concerning this matter, pleas	se call:at (305	528-6998
Name	of Contact Person	at (Area Co	de & Daytime Telephone Number
	or the following amount made		•
S35 Filing Fee	☐ \$43.75 Filing Fee & Certificate of Status	S43.75 Filing Fee & Certified Copy (Additional copy is enclosed)	S52.50 Filing Fee Certificate of Status Certified Copy (Additional Copy is enclosed)
An Div P.C	illing Address sendment Section vision of Corporations b. Box 6327 lahassee, FL 32314	Ameno Divisio The C 2415 l	Address Iment Section on of Corporations entre of Tallahassee N. Monroe Street, Suite 810 assee, FL 32303