383168

(Re	questor's Name)	<u>_</u>
(Ad	ldress)	
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(Cit	ty/State/Zip/Phone	#h
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PICK-UP	☐ WAIT	MAIL
(Bu	siness Entity Name	e)
(Do	cument Number)	
Certified Copies	Certificates	of Status
	_ certificates	or olates
Special Instructions to	Filing Officer:	
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COVER LETTER

TO: Amendment Section Division of Corporations

NAME OF CORPOR	RATION: LOPEZ OPTICAL	., INC.		
DOCUMENT NUMI				
	of Amendment and fee are su	bmitted for filing.		
Please return ali corre	spondence concerning this ma	itter to the following:		
	AUGUSTO R. LOPEZ			
		Name of Contact Person)	
	SANCHEZ-MEDINA, GONZALEZ, QUESADA, LAGE, GOMEZ & MACHADO, I			
	Firm/ Company			
	201 ALHAMBRA CIRCLE,	STE. 1205		
		Address		
	CORAL GABLES, FL 3313	4		
		City/ State and Zip Code		
	alopez@smgqlaw.com			
		sed for future annual report	notification)	
For further informatio	n concerning this matter, plea		978-5548	
Name of Contact Person		at (Area Co) 978-5548 de & Daytime Telephone Number	
Enclosed is a check fo	r the following amount made			
S35 Filing Fee	☐\$43.75 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		Amend	Address ment Section	
	sion of Corporations Box 6327	Division of Corporations The Centre of Tallahassee		
P.O. Box 6327 Tallahassee, FL 32314		2415 N. Monroe Street. Suite 810		

Tallahassee, FL 32303

Articles of Amendment to Articles of Incorporation of

LOPEZ OPTICAL, INC.		76 7 3.1		
(<u>Name o</u>	of Corporation as curren	tly filed with the Florida Dept. of State)		
383168				
	(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 following amendment(s) to		
A. If amending name, enter the new n	ame of the corporation:			
		The new		
name must be distinguishable and contain "Inc.," or Co.," or the designation "C "chartered," "professional association."	'orp," "Inc," or "Co",	"company," or "incorporated" or the abbreviation "Corp.," A professional corporation name must contain the word		
		1340 SW 8th St.		
B. Enter new principal office address, if applicable: (Principal office address MUST BE A STREET ADDRESS)		Miami, Florida 33135		
				
C. Enter new mailing address, if appl		1340 SW 8th St.		
(Mailing address <u>MAY BE A POST OFFICE BOX</u>)		Miami, Florida 33135		
D. If amending the registered agent ar new registered agent and/or the new				
Name of New Registered Agent	Angusto R. Lonez c/o Sanchez-Medina, Gonzalez, Ouesada, Lage, Gomez			
Name of New Registered Agent	201 Alhambra Circle, Ste	: 1205		
		treet address)		
New Registered Office Address:	Coral Gables	, Florida		
New Registered Office Agaress.		(City) (Zip Code)		
New Registered Agent's Signature, if c I hereby accept the appointment as regist	hanging Registered Agen ered avent – Lam familiar	it: with and accept the obligations of the position.		
, nevery accept the approximation and eggin				
	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.

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> <u>John</u>	1 Doe	
X Remove	<u>V</u> <u>Mik</u>	e Jones	
X Add	<u>SV</u> <u>Sall</u>	y Smith	
Type of Action (Check One)	<u>Title</u>	<u>Name</u>	<u>Addres</u> s
1) Change	PVTSD	Carlos A. Lopez	11217 W. Biscayne Canal Rd.
Add X Remove			Miami, FL 33161
2) Change	PD	Carey Marc Lopez	453 NE 102 St.
X Add			Miami, FL 33138
Remove 3) Change	VD	Daniel Albert Avila	690 SW FCt., Unit 3119
X Add			Miami, FL 33130
Remove 4) Change	Τ	Nicole Marie Nguyen	5442 Jackwood Street
X Add			Houston, TX 77096
Remove 5) Change	S	Lauren Carpintero	8775 SW 2 Terr.
X Add			Miami, FL 33174
Remove			
6) Change			
Add			
Remove			

	<mark>lding additional A</mark> sheets, if necessary	e). (Be specific)				
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<u>f an amendment</u> neorieione for im	provides for an e-	vehange, reclassifi	ication, or cance	ellation of issued	shares,	
(if not applica	able, indicate N/A)	mendment if not c	outained in the	amenamene rese		
		·				
						
			<u> </u>			

The date of each amendment(s) add date this document was signed.	pption:	, if other than the
_		
Effective date <u>if applicable</u> :	(no more than 90 days after amendment file date)	· · · · · · · · · · · · · · · · · · ·
Note: If the date inserted in this blo document's effective date on the Dep	ick does not meet the applicable statutory filing requirements, artment of State's records.	this date will not be listed as the
Adoption of Amendment(s)	(<u>CHECK ONE</u>)	
☐ The amendment(s) was/were adop action was not required.	ted by the incorporators, or board of directors without sharehold	ler action and shareholder
The amendment(s) was/were adop by the shareholders was/were suff	ted by the shareholders. The number of votes cast for the amen icient for approval.	dment(s)
	oved by the shareholders through voting groups. The following ach voting group entitled to vote separately on the amendments:	
"The number of votes cast fo	or the amendment(s) was/were sufficient for approval	
by		
	(voting group)	
MARCH 1 Dated	lavia Parela	
(By)a dire selected.	ector, president or other officer – if directors or officers have no by an incorporator – if in the hands of a receiver, trustee, or oth d fiduciary by that fiduciary)	
N	IARIA C. AVILA	
_	(Typed or printed name of person signing)	
,	As Personal Representative of The Estate of Maria A. Lopez	
_	(Title of person signing)	