

D21000000075

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

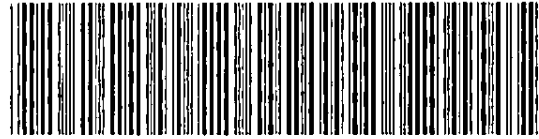
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

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300387340983

Amendment

05/20/22--01001--006 **52.50

FILED
2022 MAY 19 AM 11:46
TALLAHASSEE, FLORIDA
A. RAMSEY

A. RAMSEY
MAY 20 2022

RECEIVED
MAY 19 PM 4:00
TALLAHASSEE, FLORIDA

FILED
2022 MAY 19 AM 11:46
TALLAHASSEE, FLORIDA

COVER LETTER

TO: Amendment Section
Division of Corporations

NAME OF CORPORATION: ALPHA CAPITAL BUSINESS TRUST

DOCUMENT NUMBER: D21000000075

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

Please return all correspondence concerning this matter to the following:

NORMAND A. ROCHA
Name of Contact Person
UNIVERSAL LEGAL CENTER
Firm/ Company
2525 PONCE DE LEON BLVD, STE 300
Address
CORAL GABLES, FL 33134
City/ State and Zip Code
ABC@ALFONSOFERRERA.COM
E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

ANTONIO ADOLFO BECHILY CARRENO at (305) 305-2670
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:

- | | | | |
|--|--|---|---|
| <input type="checkbox"/> \$35 Filing Fee | <input type="checkbox"/> \$43.75 Filing Fee &
Certificate of Status | <input type="checkbox"/> \$43.75 Filing Fee &
Certified Copy
(Additional copy is
enclosed) | <input checked="" type="checkbox"/> \$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

ALPHA CAPITAL BUSINESS TRUST

D21000000075

(Document Number of Corporation (if known))

Pursuant to the provisions of section 609, Florida Statutes, this Declaration of Trust adopts the following amendment(s) to its Articles of Incorporation:

A. If amending name, enter the new name

N/A

B. Enter new principal office address, if applicable:
(Principal office address MUST BE A STREET ADDRESS)

N/A

N/A

N/A

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

N/A

N/A

N/A

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 N/A

N/A

(Florida street address)

New Registered Office Address: N/A

Florida N/A

(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) (c), F.S.

FILED

2022 MAY 19 AM 11:46

IF PETITIONER, SIGN

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:

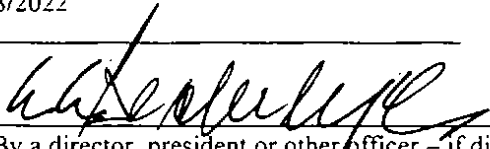
☒ Change PT John Doe

☒ Remove V Mike Jones

☒ Add SV Sally Smith

Type of Action (Check One)	Title	Name	Address
1) <input type="checkbox"/> Change	<u>TRUS</u>	<u>YATYTA S.A.</u>	<u>2525 PONCE DE LEON BLVD</u>
<input type="checkbox"/> Add			<u>STE 300</u>
<input checked="" type="checkbox"/> Remove			<u>CORAL GABLES, FL 33134</u>
2) <input type="checkbox"/> Change	<u>TRUS</u>	<u>JDC CONSULTANT LLC</u>	<u>2525 PONCE DE LEON BLVD</u>
<input checked="" type="checkbox"/> Add			<u>STE 300</u>
<input type="checkbox"/> Remove			<u>CORAL GABLES, FL 33134</u>
3) <input type="checkbox"/> Change	<u> </u>	<u> </u>	<u> </u>
<input type="checkbox"/> Add			<u> </u>
<input type="checkbox"/> Remove			<u> </u>
4) <input type="checkbox"/> Change	<u> </u>	<u> </u>	<u> </u>
<input type="checkbox"/> Add			<u> </u>
<input type="checkbox"/> Remove			<u> </u>
5) <input type="checkbox"/> Change	<u> </u>	<u> </u>	<u> </u>
<input type="checkbox"/> Add			<u> </u>
<input type="checkbox"/> Remove			<u> </u>
6) <input type="checkbox"/> Change	<u> </u>	<u> </u>	<u> </u>
<input type="checkbox"/> Add			<u> </u>
<input type="checkbox"/> Remove			<u> </u>

05/18/2022
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)

ANTONIO ADOLFO BECHILY CARRENO

(Typed or printed name of person signing)

CHAIRMAN OF THE BOARD OF DIRECTORS

(Title of person signing)