

F18 00000884

Florida Department of State
Division of Corporations
Electronic Filing Cover Sheet

Note: Please print this page and use it as a cover sheet. Type the fax audit number (shown below) on the top and bottom of all pages of the document.

((H23000227826 3)))



H230002278263AEC%

Note: DO NOT hit the REFRESH/RELOAD button on your browser from this page.
Doing so will generate another cover sheet.

To:
Division of Corporations
Fax Number : (850)617-6388

From:
Account Name : TAP SOLUTIONS INC
Account Number : I20210000103
Phone : (786)615-3057
Fax Number : (786)615-3058

****Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please.****

Email Address: info@tapsolution.net

**COR AMND/RESTATE/CORRECT OR O/D RESIGN
HAPPY SOLUTIONS CORP.**

Certificate of Status	1
Certified Copy	0
Page Count	05
Estimated Charge	\$43.75

Electronic Filing Menu

Corporate Filing Menu

Help

2023 JUN 28 AM 8:45
F18 00000884

2023 JUN 28 PM 2:37
F18 00000884



June 27, 2023

FLORIDA DEPARTMENT OF STATE
Division of Corporations

HAPPY SOLUTIONS CORP.
571 SW 9TH ST 311
MIAMI, FL 33130US

SUBJECT: HAPPY SOLUTIONS CORP.
REF: F18000000884

We received your electronically transmitted document. However, the document has not been filed. Please make the following corrections and refax the complete document, including the electronic filing cover sheet.

The form you submitted is for a FLORIDA CORPORATION, but your entity is a FOREIGN CORPORATION. Please complete and return the enclosed blank form(s).

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6050.

Tammi Cline
Regulatory Specialist II Supervisor

FAX Aud. #: E23000227826
Letter Number: 523A00014535

PROFIT CORPORATION
APPLICATION BY FOREIGN PROFIT CORPORATION TO FILE AMENDMENT TO APPLICATION FOR
AUTHORIZATION TO TRANSACT BUSINESS IN FLORIDA
(Pursuant to s. 607.1504, F.S.)

SECTION I
(1-3 MUST BE COMPLETED)

F18000000884

(Document number of corporation (if known))

1. HAPPY SOLUTIONS CORP

(Name of corporation as it appears on the records of the Department of State)

2. DELAWARE

(Incorporated under laws of)

3. 02/21/2018

(Date authorized to do business in Florida)

SECTION II
(4-7 COMPLETE ONLY THE APPLICABLE CHANGES)

4. If the amendment changes the name of the corporation, when was the change effected under the laws of its jurisdiction of incorporation? _____

5. _____
(Name of corporation after the amendment, adding suffix "corporation," "company," or "incorporated," or appropriate abbreviation, if not contained in new name of the corporation)

(If new name is unavailable in Florida, enter alternate corporate name adopted for the purpose of transacting business in Florida)

6. If the amendment changes the period of duration, indicate new period of duration.

(New duration)

7. If the amendment changes the jurisdiction of incorporation, indicate new jurisdiction.

(New jurisdiction)

8. 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 _____

(Florida street address)

New Registered Office Address: _____, Florida _____
(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

9. If the amendment changes person, title or capacity in accordance with 607.1504 (4), indicate that change:

<u>Title/ Capacity</u>	<u>Name</u>	<u>Address</u>	<u>Type of Action</u>
P	ALEJANDRO GONZALEZ	571 SW 9TH ST 311	<input type="checkbox"/> Add
		MIAMI, FL 33130	<input checked="" type="checkbox"/> Remove
MGR	DANIELA GONZALEZ	571 SW 9TH ST 311	<input type="checkbox"/> Add
		MIAMI, FL 33130	<input checked="" type="checkbox"/> Remove
P	MARIA MUJICA GOMEZ	571 SW 9TH ST 311	<input checked="" type="checkbox"/> Add
		MIAMI, FL 33130	<input checked="" type="checkbox"/> Remove
VP	ALEJANDRO GONZALEZ	571 SW 9TH ST 311	<input checked="" type="checkbox"/> Add
		MIAMI, FL 33130	<input checked="" type="checkbox"/> Remove
T	DANIELA GONZALEZ	571 SW 9TH ST 311	<input checked="" type="checkbox"/> Add
		MIAMI, FL 33130	<input type="checkbox"/> Remove

2023 JUN 28 AM 8:45

611 310

10. Attached is a certificate or document of similar import, evidencing the amendment, authenticated not more than 90 days prior to delivery of the application to the Department of State, by the Secretary of State or other official having custody of corporate records in the jurisdiction under the laws of which it is incorporated.

Maria Mujica Gomez
(Signature of a director, president or other officer - If in the hands of a receiver or other court appointed fiduciary, by that fiduciary)

Maria Mujica Gomez

(Typed or printed name of person signing)

P

(Title of person signing)

FILING FEE \$35.00