## F20000004453

(Requestor's Name)
(Address)
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(City/State/Zip/Phone #)
D PICK-IJP WAIT
(Business Entity Name)
(Document Number)
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Special Instructions to Filing Officer.





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O SIMMONS

JAN 28 2021

COVER LETTER
TO: Amendment Section Division of Corporations
SUBJECT: A Chesin Campany Name of Corporation
DOCUMENT NUMBER: FZOOCOO 445
The enclosed Amendment and fee are submitted for filing.
Please return all correspondence concerning this matter to the following:
Christopher Rosers Name of Contact Person
A Chairm Company Firm/Company
7750 NW 72nd are Address
City/State and Zip Code
E-mail address: (to be used for future annual report notification)
For further information concerning this matter, please call:
Charles Roser Rosers at (305) 887 7808  Name of Contact Person Area Code & Daytime Telephone Number
Enclosed is a check for the following amount:

**Mailing Address:** 

□\$35 Filing Fee

Amendment Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314

☐ \$43.75 Filing Fee &

Certificate of Status

## Street Address:

☐ \$43.75 Filing Fee &

Certified Copy

Amendment Section Division of Corporations The Centre of Tallahassee 2415 N. Monroe Street, Suite 810 Tallahassee, FL 32303

☑ \$52.50 Filing Fee,

Certified Copy

Certificate of Status &

## PROFIT CORPORATION APPLICATION BY FOREIGN PROFIT CORPORATION TO FILE AMENDMENT TO APPLICATION FOR

AUTHO	DRIZATION TO TRANSACT (Pursuant to s. 607.15)		•	To an array franch
	SECTION I (1-3 MUST BE COM	l PLETED)	2021 JAN :	28 PM 4: 25
	(1-3 MUST BE COM)  F 700000  (Document number of corpor	445-3		ATE
	(Document number of corpor	ration (if known)		v <b>a.</b>
1. A Ch	rporation as it appears on the rec	<u> </u>		
Delarere	33		-05-70	
(Incorporated under la	iws of)	(Date author	orized to do busi	ness in Florida)
(4-7 (	SECTION II COMPLETE ONLY THE APP		ANGES)	
4. If the amendment changes the name of the incorporation?	·	_	r the laws of its	jurisdiction of
Name of corporation after the amendmen				· · · · · · · · · · · · · · · · · · ·
(If new name is unavailable in Florida, enter 6. If the amendment changes the period			ose of transacting	g busingss in Florida)
	(New duration	n)		
7. If the amendment changes the jurisdic	ction of incorporation, indicate n	new jurisdiction.		
•	(New jurisdiction	on)		
3. If amending the registered agent and/or new registered agent and/or the new reg	gistered office address:			
	1786 Nw 72nd c (Florida street addre	ess)	T	
New Registered Office Address:	Miami (City)		, Florida	Zip Code)
New Registered Agent's Signature if c	hanning Registered Agent.			

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 amen-	dment changes person, title or capacity in acco	ordance with 607,1504 (4), indicate that change:	
Title/ Capacity	<u>Name</u>	Address 2021 JA	of Action
	Vosey Colleges	2021 JAI 7750 NW 72nd ase	□Add
		Mican: PC 33166	Exemove
<u>T</u>	Genevieve Basset	7750 NW 72nd ave	□Add
		Mirani FL 33166	Demove
VLUP	- Pavil Herrera	7750 NW 72nd and	□Add
		Miani Fl. 33166	<b>D</b> emove
			□Add
			Remove
			□Add
			Remove
of the applicati	certificate or document of similar import, evion to the Department of State, by the Secreta of which it is incorporated.	idencing the amendment, authenticated not more ry of State or other official having custody of corpo	than 90 days prior to deliver orate records in the jurisdictio
	12	P4	
	(Signature of a director a receiver or other co	or, president or other officer - if in the hands of art appointed fiduciary, by that fiduciary)	<u> </u>
	Michaelar Rous		
	(Typed or printed name of person signing)	(Title of person sign	ning)

FILING FEE \$35.00