H92708

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T SCHROEDER

COVER LETTER

TO: Amendment Section Division of Corporations

NAME OF CORPO	ORATION: Latin Internation	al Inc				
DOCUMENT NUMBER: H92708						
The enclosed Article	es of Amendment and fee are :	submitted for filing.				
Please return all corr	espondence concerning this m	natter to the following:				
	Luna Albalah					
	Name of Contact Person					
	Firm/ Company					
	1068 West Flagler Street					
	Address Miami FL 33130					
		City/ State and Zip Coo	le			
tach	ertax@bellsouth.net					
	E-mail address: (to be u	ised for future annual repor	t notification)			
For further information	on concerning this matter, plea	se call:				
Luna Albalah		305	324-8177			
Name	of Contact Person		ode & Daytime Telephone Number			
Enclosed is a check for	or the following amount made	payable to the Florida Dep	artment of State:			
S35 Filing Fee	☐\$43.75 Filing Fee & Certificate of Status	S43.75 Filing Fee & Certified Copy (Additional copy is enclosed)	□\$52.50 Filing Fee Certificate of Status Certified Copy (Additional Copy is enclosed)			
Ame Divi P.O.	ling Address endment Section sion of Corporations Box 6327 ahassee, FL 32314	Amend Divisio Clifton	Address Iment Section on of Corporations Building xecutive Center Circle			

Tallahassee, FL 32301

Articles of Amendment to Articles of Incorporation of

Latin International Inc	
	n as currently filed with the Florida Dept. of State)
1192708	
(Docume)	nt Number of Corporation (if known)
Pursuant to the provisions of section 607.1006, Florida Sits Articles of Incorporation:	Statutes, this Florida Profit Corporation adopts the following amendment(s) to
A. If amending name, enter the new name of the corp	poration:
	The new
name must be distinguishable and contain the word "Corp.," "Inc.," or Co.," or the designation "Corp," word "chartered," "professional association," or the ab	"corporation," "company," or "incorporated" or the abbreviation
B. Enter new principal office address, if applicable: (Principal office address MUST BE A STREET ADDRE	<u>ESS</u>)
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)	
D. If amending the registered agent and/or registered new registered agent and/or the new registered offi	office address in Florida, enter the name of the ice address:
Name of New Registered Agent	ice address:
	(Florida street address)
New Registered Office Address:	(City) . Florida ジューター
	(2.tp Code)
New Registered Agent's Signature, if changing Register hereby accept the appointment as registered agent. I am	red Agent: n familiar with and accept the obligations of the position.
Signatur	e of New Registered Agent, if changing

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:	ove, and Sally Sn	iith, SV as an Add.	v
X Change	<u>PT</u> <u>Joh</u>	ın Doe	
X Remove	<u>V</u> <u>Mil</u>	ke Jones	
X Add	<u>SV</u> <u>Sall</u>	ly Smith	
Type of Action (Check One)	<u>Title</u>	Name	<u>Addres</u> s
1) Change	VP	Ralph Maya	3640 Yacht Club Dr 807
Add x Remove			Aventura FL 33180
2) X Change	VP	Lyna Albakh	3600 Yach+ Cl-6 al42
Add			3600 Yach+ CL16 altz Averynin FL 33180
Remove			
3) Change			
Add			19 21-1-1-1-1-1-1-1-1-1-1-1-1-1-1-1-1-1-1-
Remove			
4) Change			30 77
Add			\$5. @ O
Remove			# ⊕ ⊕ ₩
5) Change			
Add			
Remove			
Change			
Add			
Remove			

Attach additional sheets, if necessary). (Be specific)	
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an amendment provides for an exchange, reclassification, or cancellation of issued shares,	9
Toxisions for implementing the amendment it not contained in the amondment it also	
(if not applicable, indicate N/A)	ω ₁ ; α ρ
	- 10 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1
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The data of soil 1	7-23-2019	
The date of each amendment(s) adoption: date this document was signed.		, if other than the
Effective date if applicable:		
	(no more than 90 days after amendment file date)	
Note: If the date inserted in this block does document's effective date on the Department o	not meet the applicable statutory filing requirements, this date wf State's records.	vill not be listed as the
Adoption of Amendment(s) (CI	IECK ONE)	
■ The amendment(s) was/were adopted by the by the shareholders was/were sufficient for	shareholders. The number of votes east for the amendment(s) approval.	
☐ The amendment(s) was/were approved by the must be separately provided for each voting	the shareholders through voting groups. The following statement group entitled to vote separately on the amendment(s):	
"The number of votes cast for the ame	ndment(s) was/were sufficient for approval	
by	ting group)	
(vo	ting group)	
action was not required.	board of directors without shareholder action and shareholder	
The amendment(s) was/were adopted by the action was not required.	incorporators without shareholder action and shareholder	
Dated	e Alale	
Signature (By a director, press	dent or other officer – if directors or officers have not been	
appointed fiduciary	rporator – if in the hands of a receiver, trustee, or other court by that fiduciary)	19
Luna Albala	ıh	
(Typed or printed name of person signing) .	- 6 -
V. P.		
	(Title of person signing)	97