105802

(Requestor's Name)
(Address)
(Address)
(Addiess)
(City/State/Zip/Phone #)
PICK-UP WAIT MAIL
(Business Entity Name)
(Document Number)
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Certified Copies Certificates of Status
Special Instructions to Filing Officer:





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Awd

COVER LETTER

TO: Amendment Section Division of Corporations

NAME OF CORPOR	ATION: KA	40 Inc			
DOCUMENT NUMB	er: L058	02			
The enclosed Articles of	f Amendment and fee are su	ibmitted for filing.			
Please return all corresp	ondence concerning this ma	tter to the following:			
	Loon	Zalo Benit	e7.		
-	Warre of Contact Person				
	tatio Inc				
-		Firm/ Company	<u> </u>		
	1. 11 P. 1. 1. 1. 1.	• •			
-	15451 NW 66th st Address Parkland, TL 33076 City/ State and Zip Code				
	Address 7.				
-	TARNIANC, 1	U 33076			
		City/ State and Zip Cod	e		
	E-mail address: (to be us	sed for future annual report	notification)		
For further information	concerning this matter, pleas	se call:			
		at f	1		
Name of	Contact Person	Area Co)		
England in a about for	the fellowing enjoyet and	annakla maka Planida Wana			
Eliciosod is a clieck for	the following amount made	payable to the Florida Depa	artment of State:		
\$35 Filing Fee	□\$43.75 Filing Fee & Certificate of Status	□\$43.75 Filing Fee & Certified Copy (Additional copy is enclosed)	□\$52.50 Filing Fee Certificate of Status Certified Copy (Additional Copy is enclosed)		
<u>Maili</u>	ng Address	Street	Address		
Amendment Section		Amendment Section			
	ion of Corporations	Division of Corporations			
P.O. Box 6327 Clifton Building Tallahassee, FL 32314 2661 Executive Center Circle					
		Tallahassee, FL 32301			

Articles of Amendment

to

Articles of Incorporation of

(Name of Corporation as currently filed with the Florida	Dept. of State)
L 05802	
(Document Number of Corporation (if known)	
(Document Number of Confidential (11 kilovin)	
Pursuant to the provisions of section 607.1006, Florida Statutes, this <i>Florida Profit Corporati</i> its Articles of Incorporation:	ion adopts the following amendmer
A. If amending name, enter the new name of the corporation:	
name must be distinguishable and contain the word "corporation," "company," or "in	TheThenew_ corporated" or the abbreviation
"Corp.," "Inc.," or Co.," or the designation "Corp." "Inc," or "Co". A professional co	orporation name must contain the
word "chartered," "professional association," or the abbreviation "P.A."	SE 199
B. Enter new principal office address, if applicable:	
(Principal office address MUST BE A STREET ADDRESS)	
,,	
	20 TO
C. Enter new mailing address, if applicable:	100 -
(Mailing address MAY BE A POST OFFICE BOX)	6
D. If amending the registered agent and/or registered office address in Florida, enter the	e 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:	
l hereby accept the appointment as registered agent. I am familiar with and accept the oblig	ations of the position.
Signature of New Registered Agent, if chang	ging

If amending the Officers and/or Directors, enter the title and name of each officer/director being removed and title, name 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 = Executive Officer; CFO = Chief Financial Officer. If an officer/director holds more than one title, list the first letter of each 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. The 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 Che Mike Jones, V as Remove, and Sally Smith, SV as an Add.

Example: XChange	<u>РТ</u>	John Doe	
X Remove	<u>v</u>	Mike Jones	
_X Add	<u>SV</u>	Sally Smith	
Type of Action (Check One)	<u>Title</u>	Name	<u>Addres</u> s
1)Change	$\sqrt{}$	Matthew Arboleda	
Add			Apt 305
Remove			Deerfield Beath, Fl 3
2) Change			
Add			
Remove			
3) Change			
Add			
Remove			
4) Change			
Add			
Remove			
5) Change			
Add			
Remove			
6) Change			
Add			·
Remove			

Attach additional sheets, if necessary). (E	Be specific)	None		
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		* * *		
				<u>-</u>
				
an amendment provides for an exchang provisions for implementing the amendn	<u>e, reclassificatio</u> nent <u>i</u> f not contai	n, or cancellation of incention	ssued shares, it itself:	
(if not applicable, indicate N/A)			-	
	Non	U		
· · · · · · · · · · · · · · · · · · ·			-	
		<u>.</u>	-	_
	-			

. The date of each amendment(s) adoption:	6-26-14	, if other th
date this document was signed. Effective date if applicable:	6-26-19	
	nore than 90 days after amendment file date)	
Note: If the date inserted in this block does not meedocument's effective date on the Department of State's		this date will not be listed
Adoption of Amendment(s) (CHECK	ONE)	
The amendment(s) was/were adopted by the shareh by the shareholders was/were sufficient for approve		dment(s)
☐ The amendment(s) was/were approved by the share must be separately provided for each voting group		
"The number of votes cast for the amendment	(s) was/were sufficient for approval	
by		
(voting gra	oup)	
☐ The amendment(s) was/were adopted by the board action was not required.	of directors without shareholder action and sha	reholder
☐ The amendment(s) was/were adopted by the incorpaction was not required.	orators without shareholder action and shareho	lder
Dated	9	
Signature	Bunts	
(By a director, president o	r other officer - if directors or officers have no	
selected, by an incorporate appointed fiduciary by that	or – if in the hands of a receiver, trustee, or oth it fiduciary)	er court
	GONZalo Bentez	
(Typed	or printed name of person signing)	7, .
	1/ be sident	
	(Title of person signing)	