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## **COVER LETTER**

**TO:** Amendment Section Division of Corporations

RLS AVE FENIX 33-7 INC NAME OF CORPORATION:	
N 23 000 007 224  DOCUMENT NUMBER:	
The enclosed Articles of Amendment and fee are submitted for filing.	
Please return all correspondence concerning this matter to the following:	
MARCOS A LOPEZ	
(Name of Contact Person)	
(Firm/ Company)	<del></del>
11212 SW WINDING LAKES CIR	
(Address)	
PORT ST LUCIE / FL 34987	
(City/ State and Zip Code)	
MARCOS_LOPEZ_2006@YAHOO.COM	
E-mail address: (to be used for future annual report notification)	0 23
For further information concerning this matter, please call:	117. 1536 17.17. 1536 17.17. 1
at	 
(Name of Contact Person) (Area Code) (Daytime Telephone I	Number)
Enclosed is a check for the following amount made payable to the Florida Department of State:	17 A E
\$35 Filing Fee \$\times \$\text{\$43.75 Filing Fee & Certificate of Status}\$  Certificate of Status (Additional copy is enclosed)  \$\times \$35 Filing Fee & Certificate of Status (Certificate of Status Certificate Opy (Additional Copy is Enclosed)	STATE ELFI

**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

RLS AVE FENIX 33-7 INC

(Name of Corporation as currently filed with the F	lorida Dept. of State)		_
N23 000 007 224			
(Documen	t Number of Corporation (if kno	own)	_
Pursuant to the provisions of section 617.1006, Florida amendment(s) to its Articles of Incorporation:	a Statutes, this <i>Florida Not For</i>	Profit Corporation adopts the followi	ng
A. If amending name, enter the new name of the co	orporation:		
		The ne	!w
name must be distinguishable and contain the word "c "Company" or "Co." may not be used in the name.	corporation" or "incorporated"	or the abbreviation "Corp." or "Inc.	**
B. Enter new principal office address, if applicable	N/A		
(Principal office address <u>MUST BE A STREET ADL</u>			
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BO	<u>N/A</u>		
D. 16			_
D. If amending the registered agent and/or register new registered agent and/or the new registered		nter the name of the	
N.	/A	<i>(</i> 0 )	٠.
Name of New Registered Agent:		<del> </del>	3
	(Flor	ida street address)	$\equiv$
New Registered Office Address:	(1. ****	11.	
		, Florida	- س
<del>-</del>	(City)	(lin Coda)	<del>=</del> :
New Registered Agent's Signature, if changing Reg	istered Agent:		T. ∾
I hereby accept the appointment as registered agent.		ne obligations of the position.	دی
	G		_
	Signature of New Register	ed 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:  X Change X Remove X Add	<u>PT</u> <u>V</u> <u>SV</u>	John Doe Mike Jones Sally Smith	
Type of Action (Check One)	<u>Title</u>	<u>Name</u>	<u>Addres</u> s
1) _X Change Add	P	WALTER INFANTE	5916 SUNSWEPT LNBLDG 92A
Remove			BOYNTON BEACH, FL 33437
2) Change Add	<del> </del>		
Remove 3) Change Add Remove			5 T.A.L.
4) Change Add	<del></del>		
Remove			
5) Change Add			F7. 23
Remove			
6) Change Add			
Remove			
E. If amending or add (attach additional sh		nal Articles, enter change(s) here: ssary). (Be specific)	
N/A			
	. <u>-</u>		

	<del></del>
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	(1) 63
,	2023 JUL 17
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	PII 4: 23
The date of each amendment(s) adoption: 7/11/2023 date this document was signed.	, if other than the
Effective date if applicable: 7/11/2023	
(no more than 90 days after amendment file date)	
Note: If the date inserted in this block does not meet the applicable statutory filing requirements, this document's effective date on the Department of State's records.	date will not be listed as the
Adoption of Amendment(s) (CHECK ONE)	
The amendment(s) was/were adopted by the members and the number of votes cast for the amendwas/were sufficient for approval.	dment(s)

Dated	7/11/2023
Signatur	Mmul a Ry
, ignitia	(By the chairman or vice chairman of the board, president or other officer-if directors have not been selected, by an incorporator – if in the hands of a receiver, trustee, or other court appointed fiduciary by that fiduciary)
	MARCOS A LOPEZ
	(Typed or printed name of person signing)

(Title of person signing)

There are no members or members entitled to vote on the amendment(s). The amendment(s) was/were

SECRETAIN TO STATE