PO10000 29232

(Re	questor's Name)	
(Ad	dress)	
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(Cit	ry/State/Zip/Phone	#)
PICK-UP	☐ WAIT	MAIL
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(Do	cument Number)	
Certified Copies	_ Certificates	of Status
Special Instructions to	Filing Officer:	
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R. WHITE FEB 0 4 2020 2020 J. J. - 9 P.N. 2: Oh

COVER LETTER

TO: Amendment Section Division of Corporations

Tallahassee, FL 32314

•	
NAME OF CORPORA	TION: Residencia Satome, Inc.
DOCUMENT NUMBE	R: P01000029232
The enclosed Articles of	Amendment and fee are submitted for filing.
Please return all correspo	indence concerning this matter to the following:
_	Kirenia garcia
	ROUPNEIG Jaloue Inc.
	8505 SW. 130 AVE.
	Miami FL. 33175
.	City/ State and Zip Code W 9 4 1 C1 A lender & Yahoo . Cod E-mail address: (to be used for future annual report notification)
For further information ec	neerning this matter, please call:
Kirk nia	Gare)a at 786, 344–226 Area Code & Daytime Telephone Number
Enclosed is a check for the	following amount made payable to the Florida Department of State:
\$35 Filing Fee	S43.75 Filing Fee & Certificate of Status Certificate of Status Certificate of Status Certificate of Status (Additional copy is enclosed) Certificate of Status Certified Copy (Additional Copy is enclosed)
Amenda	Address Street Address ent Section Amendment Section of Corporations Division of Corporations 6327 The Centre of Tallahassee

2415 N. Monroe Street, Suite 810

Tallahassee, FL 32303

Articles of Amendment

to

Articles of Incor	poration	2020	
Residencia Salone,"	Inc.	2020 J 9	PM 2: 04
(Name of Corporation as currently f	iled with the Florida Dept. of S	itate)	•
701000029232			
(Document Number of C	orporation (if known)		
Pursuant to the provisions of section 607,1006, Florida Statutes, this Florida Statutes, the Florid	orida Profit Corporation adopts	the following am	endment(s) to
A. If amending name, enter the new name of the corporation:	,		
	NA	The	new
name must be distinguishable and contain the word "corporation," "con "Inc.," or Co.," or the designation "Corp." "Inc.," or "Co". A p "chartered," "professional association," or the abbreviation "P.A." B. Enter new principal office address, if applicable: (Principal office address MUST BE A STREET ADDRESS)	npany," or "incorporated" or the professional corporation name Paul	e abbreviation "C must-contain the	orp.," word
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX) D. If amending the registered agent and/or registered office addres	Sauce s in Florida, enter the name of	· the	
new registered agent and/or the new registered office address:			
Name of New Registered Agent KIRAIL	Garcia	. <u></u>	
3525 Cus	130 AE		
New Registered Office Address: New Registered Office Address: (C.	address)	rida 337 (Zip Code)	75
New Registered Agent's Signature, if changing Registered Agent: I hereby accept the appointment as registered agent. I am familiar with Signature of New Registered.	h and accept the obligations of t	he position.	

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:

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 Doc 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 Doc, PT as a Change, Mike Jones, V as Remove, and Sally Smith, SV as an Add.

Example: X Change	<u>PT Jot</u>	ın Doe	
X Remove	<u>∨ Mi</u>	ke Jones	
<u>X</u> Add		ly Smith	
Type of Action (Check One)	<u>Title</u>	<u>Name</u>	Address
1)Change	PT	<u> Kirlnia Gaicia</u>	3525 SW. 130 Ar
∑_ Add			Miami TL 3317
Remove			
21 Change			
Add			-
Remove 3) Change			
Add			
Remove			
4) Change			
Add			
Remove			
51 Change			
Add			
Remove			
6) Change	 _		
Add			·*···
Remove			
		Page 2 of 4	
E. <u>If amending or addi</u> (Attach <i>additional she</i>	ng additional A	rticles, enter change(s) here:	
	g commer y	· (we specially)	

The state of the s	ics, coter change(s) here:	
(Attach additional sheets, if necessary).	(Be spacific)	
·····		

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	<u></u>	
,		
F. If an amendment provides for an exchange, re provisions for implementing the amendment	if not contained in the amendment itself:	
(if not applicable, indicate N/A)	II not concained in the amendment tests.	
NIA		
<u> </u>		
	Page 3 of 4	
	intin house	
The date of each amendment(s) adoption:	10/10/201	, if other than the
date this document was signed.	, ,	
Effective date if applicable:	10/10/2019	

Note: If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as the document's effective date on the Department of State's records.

Adoption of Amendment	(s) (<u>CHECK ONE</u>)
The amendment(s) was by the shareholders was	were adopted by the shareholders. The number of votes east for the amendment(s) s/were sufficient for approval.
☐ The amendment(s) was/ must be separately prov	were approved by the shareholders through voting groups. The following statement vided for each voting group entitled to vote separately on the amendment(s):
"The number of ve	otes cast for the amendment(s) was/were sufficient for approval
by	
	(voting group)
The amendment(s) was/ action was not required.	were adopted by the board of directors without shareholder action and shareholder
(s) Wash action was not required.	were adopted by the incorporators without shareholder action and shareholder
Dated	12-01-2019
Signature	
	(By a director, president or other officer – if directors or officers have not been selected, by an incorporator – if in the hands of a receiver, trustee, or other court appointed fiduciary by that fiduciary)
	(Typed or printed name of person signing)
	PT Mee
	(Title of person signing)