P01000042234

(Re	questor's Name)	
(Ad	dress)	•
	1 >	
DA)	dress)	
(Cit	y/State/Zip/Phone	e #)
PICK-UP	WAIT	MAIL
	-i-aa Fatin Nas	\
(Bu	siness Entity Nar	nej
(Do	cument Number)	
Certified Copies	_ Certificates	s of Status
	_	
Special Instructions to	Filing Officer:	

Office Use Only



100316274651

08/21/18--010009--027 ♦♦35.00

TILED 2018 AUG 21 AM II: 13 SECRETARY OF STAT

COLDEN 23 2018

COVER LETTER

TO: Amendment Section Division of Corporations

NAME OF CORPORATION: Fortune Development	opment Sales Corp
DOCUMENT NUMBER: P01000042234	
The enclosed Articles of Amendment and fee are	submitted for filing.
Please return all correspondence concerning this i	matter to the following:
Olga De Los Santos	
	Name of Contact Person
Fortune Development Sa	ales Corp.
	Firm/ Company
1300 Brickell Ave	· ······· Gonpuny
	Address
Miami, FL 33131	
	City/ State and Zip Code
Olga@fortuneintlgroup.com	
E-mail address: (to be	used for future annual report notification)
For further information concerning this matter, pla	ease call:
Olga De Los Santos	at (365) 351 1000 Area Code & Daytime Telephone Number
Name of Contact Person	Area Code & Daytime Telephone Number
Enclosed is a check for the following amount mad	le payable to the Florida Department of State:
■ \$35 Filing Fee	· · ·
Mailing Address Amendment Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314	Street Address Amendment Section Division of Corporations Clifton Building 2661 Executive Center Circle

Tallahassee, FL 32301

Articles of Amendment Articles of Incorporation

FILED

2018 AUG 21 AM 11: 13

Fortune Development Sales Corp

(Name of Corporation as currently filed with the Florida Dept. of State FCRETARY OF STATE TALL AHASSEE, FL

If amending name, enter the new name of the	narraration)
is amending hame, enter the new hame of the	corporation:
	The no Tord "corporation," "company," or "incorporated" or the abbreviation, ""Inc," or "Co". A professional corporation name must contain to the abbreviation "P.A."
. Enter new principal office address, if applicable principal office address MUST BE A STREET AL	
. Enter new mailing address, if applicable: (Mailing address <u>MAY BE A POST OFFICE B</u>	<u></u>
new registered agent and/or the new registere	tered office address in Florida, enter the name of the ed office address:
new registered agent and/or the new registere	ed office address:
new registered agent and/or the new registere Name of New Registered Agent	ed office address: (Florida street address)
new registered agent and/or the new registere	ed office address:

Signature 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: \underline{X} Change	PT	John Doe	
X Remove	<u>V</u>	Mike Jones	
X Add	<u>sv</u>	Sally Smith	
Type of Action (Check One)	<u>Title</u>	<u>Name</u>	<u>Addres</u> s
1) Change	٧	Mark David Porde5	C/O Fortune Development Sales
X Add		Mark David Pardes	1300 Brickell Ave
Remove			Miami, FL, 33131
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).	icles, enter change(s) here: (Be specific)
· · · · ·	
····	
· · · · · · · · · · · · · · · · · · ·	
an amendment provides for an exch	nange, reclassification, or cancellation of issued shares,
(if not applicable, indicate N/A)	ndment if not contained in the amendment itself:
,	
•	

The date of each amendment(s) adoption:	, if other than the
date this document was signed.	
Effective date <u>if applicable</u> :	
(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 date document's effective date on the Department of State's records.	will not be listed as the
Adoption of Amendment(s) (CHECK ONE)	
The amendment(s) was/were adopted by the shareholders. The number of votes cast for the amendment(s) by the shareholders was/were sufficient for approval.	
☐ The amendment(s) was/were approved by the shareholders through voting groups. The following statement must be separately provided for each voting group entitled to vote separately on the amendment(s):	,
"The number of votes cast for the amendment(s) was/were sufficient for approval	
by"	
(voting group)	
☐ The amendment(s) was/were adopted by the board of directors without shareholder action and shareholder action was not required.	
☐ The amendment(s) was/were adopted by the incorporators without shareholder action and shareholder action was not required.	
8/7/2018	
Signature 1. Cliescent	
(By a director, president or other officer - it 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)	
(Typed or printed name of person signing)	
President	
(Title of person signing)	