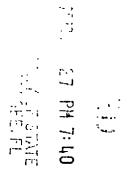


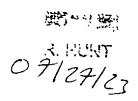
(Requestor's Name)
(Address)
(taulous)
(Address)
(City/State/Zip/Phone #)
PICK-UP WAIT MAIL
(Business Entity Name)
(Crosses County County)
(Document Number)
Certified Copies Certificates of Status
Special Instructions to Filing Officer:





07/27/23--01009--009 **35.00





COVER LETTER

TO: Amendment Section Division of Corporations

NAME OF CORPO	RATION: JACOBO & ASSO	CIATES INC.		
DOCUMENT NUM				
The enclosed Articles	of Amendment and fee are su	bmitted for filing.		
Please return all corre	spondence concerning this ma	tter to the following:		
	LUIS F JACOBO			
		Name of Contact Persor	1	
	JACOBO & ASSOCIATES I	NC.		
		Firm/ Company		
	701 PROMENADE DR SUI	TE 110		
		Address		· .
	PEMBROKE PINES, FL 330	26		
	-	City/ State and Zip Code	e	
	INFO@JACOBOTAN.COM			THE STATE
	E-mail address: (to be us	sed for future annual report	notification)	平 語 6
For further information	n concerning this matter, pleas	se call:		
LUIS F JACOBO		at (305	556-0044	
Name	Name of Contact Person Area Code & Daytime Telephone Number			Number
Enclosed is a check for	or the following amount made	payable to the Florida Depa	artment of State:	
S35 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)	
Am Div P.O	iling Address endment Section ision of Corporations . Box 6327 ahassee, FL 32314	Amend Division The Co 2415 Y	Address Iment Section on of Corporations entre of Tallahassee N. Monroe Street, Suite assee, FL 32303	810

Articles of Amendment to Articles of Incorporation of

JACOBO	R.	ASSOCI	ATES	INC
ノハに ひわむ	α	ひっついしし	/	HING.

JACOBO & ASSOCIATES INC.	d Cl L id at Ph in D at Co)	
(Name of Corporation as curre P01000080405	rently filed with the Florida Dept. of State)	
. wa	per of Corporation (if known)	
Oursuant to the provisions of section 607.1006, Florida Statutes, t ts Articles of Incorporation:	this Florida Profit Corporation adopts the following amendr	ment(s)
A. If amending name, enter the new name of the corporation	<u>ı:</u>	
		ew.
name must be distinguishable and contain the word "corporation, "Inc.," or Co.," or the designation "Corp," "Inc," or "Co" "chartered," "professional association," or the abbreviation "P.	". A professional corporation name must contain the wo	ord
2. Enter new principal office address if applicables	,	
B. Enter new principal office address, if applicable: (Principal office address MUST BE A STREET ADDRESS)		- ·
	N N	-
	1	
Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)		
maning datess <u>may be a rost of the boa</u>		<u>*</u> 44.268
		_
	P. S. W.	_
D. If amending the registered agent and/or registered office a		
new registered agent and/or the new registered office add	ress:	
Name of New Registered Agent		
(Florida	la street address)	
New Registered Office Address:	, Florida	_
	(Zip Code)	
New Registered Agent's Signature, if changing Registered Agenteeby accept the appointment as registered agent. I am famili		
4,	The same of the sa	
Signature of Ne	w Registered Agent, if changing	

Check if applicable

☐ The amendment(s) is/are being filed pursuant to s. 607.0120 (11) (e), F.S.

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:

 $P \neq President; V = Vice President; T = Treasurer; S = Secretary; D = Director; TR = Trustee; C = Chairman or Clerk; CEO = Chief Executive Officer; CFO = Chief Financial Officer. If an officer/director holds more than one title, list the first letter of each office held. President, Treasurer, Director would be PTD.$

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: XChange	<u>PT</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	Address
1) Change	VP	MARIO DELGADO	2911 N PINE ISLAND RD
Add			APT 112.
X Remove			SUNRISE, FL 33322
2) Change		_	
Add			
Remove 3) Change			; ;
Add			
Remove			(n)
4) Change		_	
Add			m 0
Remove			
5) Change			
Add			
Remove			
6) Change			
Add			
Remove			

	·
	ذمن
	نب
	,
	_2 PO
	-0-11 -D
	<u> </u>
	<u> </u>
	FATE NO.
an amendment provides for an exchange, reclassification, or cancellation of issued share	<u>res,</u>
rovisions for implementing the amendment if not contained in the amendment itself: (if not applicable, indicate N/A)	
ty nor typnicane, marcine with	
	- · · · · · · · · · · · · · · · · ·
	•

	07/21/2023		
The date of each amendment(s) adoption	on:		, if other than th
date this document was signed.			
07/21/202	3		
Effective date <u>if applicable</u> :	(no more than 90 days after amendment file date)		
Note: If the date inserted in this block of document's effective date on the Departn	does not meet the applicable statutory filing requirements, nent of State's records.	this date w	ill not be listed as t
Adoption of Amendment(s)	(<u>CHECK ONE</u>)		
■ The amendment(s) was/were adopted action was not required.	by the incorporators, or board of directors without sharehold	der action a	nd shareholder
☐ The amendment(s) was/were adopted by the shareholders was/were sufficie	by the shareholders. The number of votes cast for the amen nt for approval.	idment(s)	
must be separately provided for each	by the shareholders through voting groups. The following voting group entitled to vote separately on the amendment(e amendment(s) was/were sufficient for approval		77.23
bv N/A	,,	1.41	
07/21/2023 Dated	(voting group)	PASSEE, FL	27 PH 7:40
(By a directo selected, by	r, president or other officer – if directors or officers have no an incorporator – if in the hands of a receiver, trustee, or oth fuciary by that fiduciary)		
LUIS	F JACOBO		
- Andrews	(Typed or printed name of person signing)		
PRES	SIDENT		
	(Title of person signing)		