

P01000113250

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S. PRATHER

COVER LETTER

TO: Amendment Section

Division of Corporations

NAME OF CORPORATION: _____ Alpha Fire Equipment Corp.

DOCUMENT NUMBER: P01000113250

The enclosed Articles of Amendment and fee are submitted for filing.

Please return all correspondence concerning this matter to the following:

Miguel A Granda

Name of Contact Person

Alpha Fire Equipment Corp.

Firm/ Company

PO Box 440847

Address

Miami, FL, 33144

City/ State and Zip Code

alphafirecorp@hotmail.com

E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

 Miguel A Granda
 at (305)
 345-0799

 Name of Contact Person
 Area Code & Daytime Telephone Number

Enclosed is a check for the following amount made payable to the Florida Department of State:

🗐 🗐 \$35 Filing Fee

Status (

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□\$52.50 Filing Fee Certificate of Status Certified Copy (Additional Copy is enclosed)

<u>Mailing Address</u> 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 a	Amendment		· ·	~3
		0			1024
	Articles of Ir	ncorporation If			2024 JUL
	1)	1		3	
Ipha Fire Equipment, Corp.		· · · · · · · · · · · · · · · · · · ·		رزع 	Ö
(<u>Name</u>	of Corporation as curren	tly filed with the Florida D	ept. of State)		
01000113250					
	(Document Number	of Corporation (if known)	-,	. =	
rsuant to the provisions of section 607. Articles of Incorporation:	1006, Florida Statutes, this	s Florida Profit Corporation	r adopts the fol	lowing am	endm
 If amending name, enter the new n for Applicable 	ame of the corporation:				
ame must be distinguishable and contain		U	12	The	
Inc.," or Co.," or the designation "C					
		*1			
chartered," "professional association,"	" or the abbreviation "P.A.	Not Applicable			
chartered, " "professional association," • Enter new principal office address,	" or the abbreviation "P.A. if applicable:				
chartered," "professional association," . <u>Enter new principal office address,</u> Principal office address <u>MUST BE A S</u>	" or the abbreviation "P.A. <u>if applicable:</u> <u>TREET ADDRESS</u>) <u>licable:</u>				
chartered," "professional association," <u>Enter new principal office address,</u> Principal office address <u>MUST BE A S</u> <u>Enter new mailing address, if appl</u> (Mailing address <u>MAY BE A POST</u>	" or the abbreviation "P.A. <u>if applicable:</u> <u>TREET ADDRESS</u>) <u>licable:</u> <u>OFFICE BOX</u>) nd/or registered office ad	Not Applicable Not Applicable dress in Florida, enter the	name of the		
chartered, " "professional association," . <u>Enter new principal office address,</u> Principal office address <u>MUST BE A S</u> . <u>Enter new mailing address, if appl</u> (Mailing address <u>MAY BE A POST</u> . <u>If amending the registered agent a</u>	" or the abbreviation "P.A. <u>if applicable:</u> <u>TREET ADDRESS</u>) <u>licable:</u> <u>OFFICE BOX</u>) nd/or registered office ad	Not Applicable Not Applicable dress in Florida, enter the	name of the		
 chartered, " "professional association," <u>Enter new principal office address</u>, Principal office address <u>MUST BE A S</u> <u>Enter new mailing address, if appl</u> (Mailing address <u>MAY BE A POST</u>) <u>If amending the registered agent and new registered agent and/or the new</u> 	" or the abbreviation "P.A. <u>if applicable:</u> <u>TREET ADDRESS</u>) <u>icable:</u> <u>OFFICE BOX</u>) <u>ind/or registered office addres</u> <u>w registered office addres</u> Not Applicable <u>(Florida s</u>)	Not Applicable Not Applicable dress in Florida, enter the	name of the		
 chartered, " "professional association," <u>Enter new principal office address</u>, Principal office address <u>MUST BE A S</u> <u>Enter new mailing address, if appl</u> (Mailing address <u>MAY BE A POST</u>) <u>If amending the registered agent and new registered agent and/or the new</u> 	" or the abbreviation "P.A. <u>if applicable:</u> <u>TREET ADDRESS</u>) <u>icable:</u> <u>OFFICE BOX</u>) <u>md/or registered office addres</u> Not Applicable	Not Applicable Not Applicable dress in Florida, enter the r	name of the	(Zip Code)	

I hereby accept the appointment as registered agent. I am familiar with and accept the obligations of the position.

Signature of New Registered Agent, if changing

Check if applicable

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

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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:

John Doe

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

 \underline{PT}

<u> </u>			
<u>X</u> Remove	<u>v</u>	Mike Jones	
<u>X</u> Add	<u>sv</u>	Sally Smith	
<u>Type of Action</u> (Check One)	<u>Title</u>	Name	Address
1) Change	SD	Amaris Granda	7765 SW 86 Street #104
X Add			Miami. FL. 33143
Remove			
2) Change	TD 	Denise Granda	12219 SW 14th Ln. #2308
X Add			Miami, FL. 33184
	VD	Miguel Granda	8965 SW 56 Terr.
X Add			Miami. FL. 33173
Remove			
4) X Change	PD	Miguel A Granda	8965 SW 56 Terr.
Add			Miami, FL. 33173
Remove			
5) Change			
Add			
Remove			
6) Change	<u> </u>		
Add			
Remove			

(Attach additional sheets, if necessary). (Be specific)	<u>iere</u> :	
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If an amendment provides for an exchange, reclassification	or cancellation of issued share	es,
provisions for implementing the amendment if not contain (if not applicable, indicate N/A)	ed in the amendment itself:	
ot Applicable		
<u></u>		

Not Applicable		
he date of each amendment(s) adoption:	, st c	other than th
Not Applicable		
ffective date if applicable:		
(no more than 90 days after amendment file date)		
ote: If the date inserted in this block does not meet the applicable statutory filing requirements, this date ocument's effective date on the Department of State's records.	will not be	e listed as th
doption of Amendment(s) (<u>CHECK ONE</u>)		
The amendment(s) was/were adopted by the incorporators, or board of directors without shareholder action action was not required.	and shareh	older
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):	AULALA RE	2024 JUL 10
"The number of votes cast for the amendment(s) was/were sufficient for approval	-	JUL
by		-
by		
		PH
July 5, 2024	\sim	ů
Dated		*
Signature		
(By a director, product 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)		
Miguel A Granda		
(Typed or printed name of person signing)		
President		
(Title of person signing)		