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COVER LETTER

TO: Amendment Secti Division of Corpo	rations			
•		1		
NAME OF CORPOR	RATION:	Iniee star	S Entrouses, In	1(
DOCUMENT NUMB	BER: PO 2 0	0013285	s Entipeises, In	
The enclosed Articles	of Amendment and fee are su	bmitted for filing.		
Please return all corres	pondence concerning this ma	itter to the following:		
	David	Name of Contact Person	on	
	14010 51.	Firm/ Company		
•	Migni F	Address 33175	de	_
•		City/ State and Zip Coo	de	
		5 @ 9 M a 1 l sed for future annual repor		
For further information	concerning this matter, plea	se call: 3 <i>0</i> \$	-785-1617	> Do Not Publ
1)awid (f Contact Person	at (<u>305</u> Area Co	- 785 - 1617 	Thore Number
Enclosed is a check for	the following amount made	payable to the Florida Dep	partment of State:	
☐ \$35 Filing Fee	☐\$43.75 Filing Fee & Certificate of Status	S43.75 Filing Fee & Certified Copy (Additional copy is enclosed)	Certificate of Status Certified Copy (Additional Copy is enclosed)	
	ing Address		Address	

Amendment Section Division of Corporations P.O. Box 6327

Tallahassee, FL 32314

Amendment Section Division of Corporations The Centre of Tallahassee 2415 N. Monroe Street, Suite 810 Tallahassee, FL 32303

Articles of Amendment

10

Articles of Incorporation of

Millos Three S	Stars En	wter be	Spic;	TNC
(Name of Corporation a	is currently filed w	ith the Florida De	ot. of State)	
P 02.00	CO 133	X554		
Document (Document	Number of Corpora	tion (if known)		
Pursuant to the provisions of section 607,1006, Florida States Articles of Incorporation:	atutes, this <i>Florida F</i>	Profit Corporation :	adopts the follo	wing amendment(s)
A. If amending name, enter the new name of the corpo	oration:			The summer
name must be distinguishable and contain the word "corpo "Inc.," or Co.," or the designation "Corp," "Inc." or "chartered," "professional association," or the abbrevian	ration," "company, "Co". A professi	or "incorporated" on all corporation	" or the abbrev name must coi	The new iation "Corp.," ntain the word
B. Enter new principal office address, if applicable: Principal office address <u>MUST BE A STREET ADDRE</u> ,	<u></u>	NA		
C. Enter new mailing address, if applicable: (Mailing address <u>MAY BE A POST OFFICE BOX</u>)		N/H	1	
D. If amending the registered agent and/or registered of new registered agent and/or the new registered office		orida, enter the n:	ame of the	2 21
Name of New Registered Agent	/	11/A-		
				
-	(Florida street uddres	ა <i>)</i>		
New Registered Office Address:	(City)		, Florida	Zıp Code)
New Registered Agent's Signature, if changing Register for the appointment as registered agent. I an	red Agent:	na mark a thinne	an and all an an artists	
. петему оссерение арронишан ах гедімегей адена. Тап	н јатинаг мыл ала с	иссері ше овидано	ns of the postii	<i>:n</i> 1
	e of New Registered	4		
Signature	e of New Registered	Agent, if changing		
Charle if appliachly				

Check if applicable

☐ The amendment(s) is/are being filed pursuant to s. 607.0120 (11) (c). 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 = 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 us a Change Mike Jones, V as Remove, and Sally Smith, SV as an Add.

X Change	PT John Doe	
X Remove	V Mike Jones	
<u>X</u> Add	<u>SV</u> <u>Sally Smith</u>	
Type of Action (Check One)	<u>Title</u> <u>Name</u>	Address
1) Change	P Hermilia Conce	poins 14610 SW 16 Street
Add		3 - 4
2) Change	P David Conce	196/1 SW 16 Street Miami, F).
Add Remove 3) Change	V alfredo Conce	1xin 14610 500 16 51.
Add Remove 4) X Change	S Hermilio Concepcion	33/71
Add		Miami, FL 33175
Remove		
Add		
Remove 6) Change		
Add		
Remove		

. If amending or adding additional A (Attach additional sheets, if necessary,). (Be specific)	
	• • •	NLA
	 	10/.77

If an amendment provides for an ex-	.change, reclassificati	ion, or cancellation of issued shares.
provisions for implementing the ar	nendment if not cont	ained in the amendment itself:
(if not applicable, indicate N/A)		.) [a
		NJA
	··-	· · · · · · · · · · · · · · · · · · ·

July 31, 2020	
The date of each amendment(s) adoption:	_, if other than the
date this document was signed.	
Effective date if applicable: July 31, 2020	
(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 will document's effective date on the Department of State's records.	not be listed as the
Adoption of Amendment(s) (CHECK ONE)	
W The amendment(s) was/were adopted by the incorporators, or board of directors without shareholder action and action was not required.	shareholder
☐ 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 1/A :	
(voting group)	
Dated 11/20/20	
Signature	
(By a director, president of 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)	
<u>David</u> Concepción	
(Typed or printed name of person signing)	
<u> </u>	
(Title of person signing)	