P03000007558

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COVER LETTER

TO: Amendment Section Division of Corporations

NAME OF CORPOR	RATION: P.L. RZ, Corp			
DOCUMENT NUMI	BER: P03000007558		<u> </u>	
	of Amendment and fee are su	bmitted for filing.		
Please return all corres	pondence concerning this ma	tter to the following:		
	Bill Torres			
		Name of Contact Person	1	
	Torres Tax Accounting			
	····	Firm/ Company		
	8502 NW 198th Terr			
		Address	·	
	Miami, FL 33015			
		City/ State and Zip Code		
bdt04	84@gmail.com			
	E-mail address: (to be us	sed for future annual report	notification)	
For further information Bill Torres	n concerning this matter, pleas		796-1537	
	£.C D	at (305		
Name o	of Contact Person	Area Co	de & Daytime Telephone Number	
Enclosed is a check fo	r the following amount made	payable to the Florida Depa	rtment of State:	
■ \$35 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)	
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

P.L. RZ, Corp

(Name of Corporation as currently filed with the Florida Dept. of State)

P03000007558

(Document Number	of Corporation (if known)
Pursuant to the provisions of section 607,1006, Florida Statutes, this Articles of Incorporation:	is Florida Profit Corporation adopts the following amend
A. If amending name, enter the new name of the corporation:	
N/A	77
name must be distinguishable and contain the word "corporat" "Corp.," "Inc.," or Co.," or the designation "Corp," "Inc," or word "chartered," "professional association," or the abbreviation.	"Co". A professional corporation name must contain
B. Enter new principal office address, if applicable:	N/A
(Principal office address <u>MUST BE A STREET ADDRESS</u>)	
C. Enter new mailing address, if applicable:	N/A
(Mailing address MAY BE A POST OFFICE BOX)	N/A
D. If amending the registered agent and/or registered office ad	
new registered agent and/or the new registered office addre	<u>:ss:</u>
NA Name of New Registered Agent	
(Florida)	street address)
New Registered Office Address:	. Florida
Territoria sync Han ang.	(City) (Zip Code)
New Registered Agent's Signature, if changing Registered Agent I hereby accept the appointment as registered agent. I am familia	
Thereby accept the apparatment as registered agent. Tam jamata	r with and accept the obligations of the position.
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: X Change	<u>PT</u>	John Do	<u>oe</u>	
X Remove	<u>v</u>	Mike Jo	<u>ones</u>	
X Add	<u>sv</u>	<u>Sally Sr</u>	nith	
Type of Action (Check One)	<u>Title</u>		<u>Name</u>	Address
I) Change	S		Milagros Ruiz	650 NE 149th ST Apt 205F
x Add				N Miami Beach, FL 33161
Remove				
2) Change				
Add				
Remove				
3) Change				
Add				
Remove				
4) Change				-
Add				April 10 Apr
Remove				
5) Change				
Add				
Remove				
6) Change		_		
Add				
Remove				

If an amendment provides for an exchange, reclassification, or cancellation of issued shares, provisions for implementing the amendment if not contained in the amendment itself. (if not applicable, indicate N/A)	(Attach additional sheets, i,	f necessary). – (Be spe	ecific)			
provisions for implementing the amendment if not contained in the amendment itself: (if not applicable, indicate N/A)	A	•				
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	provisions for implemen	nting the amendment	if not contained in	<u>the amendmen</u>	t itself:	
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The date of each amendment(s) adoption:	, if other than the
Effective date <u>if applicable</u> : (no more than 90 days after amendment file date)	
(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 document's effective date on the Department of State's records.	date will not be listed as th
Adoption of Amendment(s) (CHECK ONE)	
☐ The amendment(s) was/were adopted by the shareholders. The number of votes cast for the amendmen by the shareholders was/were sufficient for approval.	t(s)
☐ The amendment(s) was/were approved by the shareholders through voting groups. The following states must be separately provided for each voting group entitled to vote separately on the amendment(s):	ment
"The number of votes cast for the amendment(s) was/were sufficient for approval	
by`` (voting group)	
(voting group)	
☐ The amendment(s) was/were adopted by the board of directors without shareholder action and shareholder action was not required.	der
■ The amendment(s) was/were adopted by the incorporators without shareholder action and shareholder action was not required.	
05/30/2017 Dated	
Signature By a director, president of other officer – if directors or officers have not bee selected, by an incorporator – if in the hands of a receiver, trustee, or other coappointed fiduciary by that fiduciary)	rn ourt
(Typed or printed name of person signing)	
PRESIDENT	
(Title of person signing)	