P03000034075

(Re	equestor's Name)	
(Ac	ddress)	
(Ac	ldress)	
(Ci	ty/State/Zip/Phon	e #)
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COVER LETTER

TO: Amendment Section

Division of Corpo	prations				
NAME OF CORPOR	ATION:	TINC.			
DOCUMENT NUMB	P03000034075		·- <u></u>		
The enclosed Articles of	of Amendment and fee are su	bmitted for filing.			
Please return all corres	pondence concerning this ma	tter to the following:			
	Alvaro A Acevedo				
	Name of Contact Person				
Acevedo& Associates					
	Firm/ Company				
	1395Brickell Avenue8thflo	ог			
- -	Address				
	Miami, Fl 33131				
-		City/ State and Zip Cod	e		
ir var	on1@gmail.com				
		sed for future annual report	notification)		
For further information	concerning this matter, pleas	se call:			
Alvaro A Acevedo		at (2008686		
Name o	f Contact Person	Area Co	de & Daytime Telephone Number		
Enclosed is a check for	the following amount made	payable to the Florida Depa	artment 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)		
Ame Divis P.O.	ing Address Indiment Section Ition of Corporations Box 6327 It hassee, FL 32314	Amend Divisio Clifton 2661 E	Address Iment Section on of Corporations Building executive Center Circle assee, FL 32301		

Articles of Amendment to Articles of Incorporation of

IMPORTIMPORTING.	
•	as currently filed with the Florida Dept. of State)
P0300034075	
(Docume	nt Number of Corporation (if known)
Pursuant to the provisions of section 607.1006, Florida Sits Articles of Incorporation:	Statutes, this Florida Profit Corporation adopts the following amendment(s) to
A. If amending name, enter the new name of the corp	poration:
	The new
name must be distinguishable and contain the word "Corp.," "Inc.," or Co.," or the designation "Corp," word "chartered," "professional association," or the a	"corporation," "company," or "incorporated" or the abbreviation "Inc," or "Co". A professional corporation name must contain the
projectional disociation, or the te	The state of the s
B. Enter new principal office address, if applicable:	
(Principal office address <u>MUST BE A STREET ADDRES</u>	(ESS)
	m seed on
C. Enter new mailing address, if applicable:	سیرے ہیں ہ ²⁷ ر سیر بیٹر کا استداد ہے۔
(Mailing address MAY BE A POST OFFICE BOX) विकास
	1244
D. If amending the registered agent and/or registered new registered agent and/or the new registered of	
Name of New Registered Agent	
Name of New Registered Agent	
	(Florida street address)
New Registered Office Address:	Florida
	(City) (Zip Code)
New Registered Agent's Signature, if changing Regis	
i hereby accept the appointment as registered agent. To	am familiar with and accept the obligations of the position.
Signat	ure of New Registered Agent, if changing

(Be specific)
ange, reclassification, or cancellation of issued shares, idment if not contained in the amendment itself:
dment if not contained in the amendment itself:

	her than the
date this document was signed.	
Effective date if applicable:	
(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 not be document's effective date on the Department of State's records.	listed as the
Adoption of Amendment(s) (<u>CHECK ONE</u>)	
☐ 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.	
06/26/16 Dated	
Signature (By a director, president 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) Alvaro A Acevedo	
(Typed or printed name of person signing)	
POA	
(Title of person signing)	_