P03000054501

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05/07/18--01032--002 **35.00



Amend

MAY 1 0 2018 I ALBRITTON

COVER LETTER

Division of Corporations Genesis P. INC Fei: 56-23 55274 **DOCUMENT NUMBER:** The enclosed Articles of Amendment and fee are submitted for filing. Please return all correspondence concerning this matter to the following: ehro bointes
Firm/Company E-mail address: (to be used for future annual report notification) For further information concerning this matter, please call: Enclosed is a check for the following amount made payable to the Florida Department of State: \$35 Filing Fee **□\$43.75** Filing Fee & □\$43.75 Filing Fee & □\$52.50 Filing Fee Certificate of Status Certified Copy Certificate of Status Certified Copy (Additional copy is (Additional Copy enclosed)

Mailing Address

TO: Amendment Section

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

is enclosed)

Articles of Amendment

	Articles of Incorporation	Make LAN
_	of ,	Se Mr.
o Genresis T	PTAX	CASCA PM
	ion as currently filed with the Florida Dept. of	State)
P030000 545	501	- 10 Miles
(Docur	ment Number of Corporation (if known)	O _A
Pursuant to the provisions of section 607.1006, Florid its Articles of Incorporation:	la Statutes, this Florida Profit Corporation adopts	the following amendment(s) to
A. If amending name, enter the new name of the co	orporation:	
	NIA	The new
"Corp.," "Inc.," or Co.," or the designation "Corpword "chartered," "professional association," or the	o," "Inc," or "Co". A professional corporation	d" or the abbreviation
B. Enter new principal office address, if applicable		INC
(Principal office address <u>MUST BE A STREET AD</u>	DRESS) 570 NW 11	6 Terro
	Miami FL	33168
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BO	OX)	
(
		· · · · · · · · · · · · · · · · · · ·
D. If amending the registered agent and/or registe	ered office address in Florida, enter the name of	the
new registered agent and/or the new registered		
Name of New Registered Agent	NIA	
Tame of the Angelia		
	(Florida street address)	
	(Fiorial Street address)	
New Registered Office Address:	, Flo	
	(City)	(Zip Code)
•		
Now Designated Association (Calculation Designation)		
New Registered Agent's Signature, if changing Reg I hereby accept the appointment as registered agent.		he position.
		•
Sign	nature 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.

X Change	<u>PT</u>	John Doe	
X Remove	<u>v</u>	Mike Jones	
X Add	<u>sv</u>	Sally Smith	
Type of Action (Check One)	Title	Name	Address
(1) Change	1	Vargas Toledo, Frank	7 NW 168 ST
Add		<i>ـــ</i>	N. Miami Beach
Remove			FL 33169
2) Change			
Add			- · · · · · · · · · · · · · · · · · · ·
			
Remove			
3) Change			
Add			
Remove			
4) Change			
Add			
Remove			
5) Change			
Add			
Remove			
6) Change			
Add			
Remove			

If amending or adding add Attach <i>additional sheets, if</i>	ittional Articles, necessary). (Be	enter change(s : specific)) here:			
		1	A			
						
				·		
		<u></u>				
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	· · · · · · · · · · · · · · · · · · ·					
f an amendment provides provisions for implement (if not applicable, indi	ng the amendme	, reclassificatio	on, or cancellati	ion of issued sh indment itself:	iares,	,
	\wedge)/A				
				<u> </u>		

The date of each amendment(s) adopti	ion: NA	, if other than the
date this document was signed.	ou	, it odici than the
Effective date <u>if applicable</u> :	N	
	(no more than 90 days after amendment file o	late)
Note: If the date inserted in this block document's effective date on the Department.	does not meet the applicable statutory filing requirer ment of State's records.	nents, this date will not be listed as the
Adoption of Amendment(s)	(CHECK ONE)	
The amendment(s) was/were adopted by the shareholders was/were sufficient	by the shareholders. The number of votes cast for the ent for approval.	amendment(s)
	d by the shareholders through voting groups. The follows voting group entitled to vote separately on the amena	
	ne amendment(s) was/were sufficient for approval	
by	(voting group)	
	by the board of directors without shareholder action as	nd shareholder
☐ The amendment(s) was/were adopted action was not required.	by the incorporators without shareholder action and sh	nareholder
Dated 04/30	0/18	
Signature	Pehro barcie	
selected, by	or, president or other officer – if directors or officers he an incorporator – if in the hands of a receiver, trustee, duciary by that fiduciary)	
	Pedro GAYCIA (Typed or printed name of person signing)	
	President	
	(Title of person signing)	