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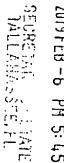
(Requestor's Name)
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PICK-UP WAIT MAIL
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Special Instructions to Filing Officer:
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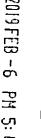
Office Use Only



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COVER LETTER

TO: Amendment Section Division of Corporations

NAME OF CORPORATIO	STIMDEL PROF	PERTIES (FL), INC.	
DOCUMENT NUMBER: _	P03000059558		
The enclosed Articles of Ame	endment and fee are s	ubmitted for filing.	
Please return all corresponder	nce concerning this ma	atter to the following:	
Christ	iane Trejgier		
		Name of Contact Perso	on!
Private	Advising Group, P.A	٠.	
	•	Firm/ Company	
600 Br	ickell Ave., Suite 172	5	
		Address	
Miami	, FL 33131		
		City/ State and Zip Coc	le
incs@pag.lav	v		
		sed for future annual report	notification
			,
For further information concer	rning this matter, pleas	se call:	
Christiane Trejgier		at (292-1599
Name of Conta	ect Person	Area Co	de & Daytime Telephone Number
Enclosed is a check for the fol	lowing amount made	эвуаble to the Florida Depa	artment of State:
	\$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		Amend Divisio Clifton	Address ment Section n of Corporations Building Accutive Center Circle

Tallahassee, FL 32301

FILED

Articles of Amendment to Articles of Incorporation

2019 FEB - 6 PM 5: 45

STIMDEL PROPERTIES (FL), INC.		CLOR FAR CLIDIATE
(Name of C	orporation as currently	flied with the Florida Dept. of State)
P03000059558		
	(Document Number of	Corporation (if known)
Oursuant to the provisions of section 607.1406 as Articles of Incorporation:	5, Florida Statutes, this F	Florida Profit Corporation adopts the following amendment(s)
A. If amending name, enter the new name	of the corporation:	
N/A		The new
rame must be distinguishable and contain "Corp.," "Inc.," or Co.," or the designation vord "chartered," "professional association,	r "Corp," "Inc," or "C	""company," or "incorporated" or the abbreviation o". A professional corporation name must contain the
. Enter new principal office address, if ap	nticahter	N/A
Principal office address MUST BE A STRE.		
Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)		N/A
If amending the registered agent and/or	registered office addres	ss in Florida, enter the name of the
new registered agent and/or the new registered office address:		
CT		CA C
Name of New Registered Agent	CORPORATION SYST	EM
Name of New Registered Agent	O Pine Island Road	EM
Name of New Registered Agent	9 Pine Island Road (Florida street	
Name of New Registered Agent	O Pine Island Road	

Donna Peterson-Riggs, Asst. Secretary

-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.

Evample: X Change	PT	John Doc	
X Remove	<u>v</u>	Mike Jones	
$X ext{ Add}$	<u>sv</u>	Sally Smith	
Type of Action (Check One)	Title	<u>Name</u>	Addiess
1) Change	N/A	N/A	
Add			
Remove			
2) Change	N/A	N/A	
Add			
Remove 3) Change	N/A	N/A	
Add			
Remove			
4) Change	N/A	N/A	
Add			
Remove			
5) Change	N/A	N/A	
Add			
Remove			
5) Change	N/A	N/A	
Add			
Damova			

If an amendment provides for no 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) A	(Attach additional sheets, if necessary)). (Be specific)
provisions for implementing the amendment if not contained in the amendment itself: (if not applicable, indicate N/A) A	4	
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(if not applicable, indicate N/A) A	provisions for implementing the ani	endment if not contained in the amendment itself:
	(if not applicable, indicate N/A)	

*The date of each amendment(s) adoption:date this document was signed.	, if other than the
Effective date if applicable:	
(no more than 90 days after amendme)	nt file date)
Note: If the date inserted in this block does not meet the applicable statutory filing redocument's effective date on the Department of State's records.	equirements, this date will not be listed as the
Adoption of Amendment(s) (CHECK ONE)	
☐ The amendment(s) was/were adopted by the shareholders. The number of votes east by the shareholders was/were sufficient for approval.	for the amendment(s)
☐ The amendment(s) was/were approved by the shareholders through voting groups. The must be separately provided for each voting group entitled to vote separately on the	ne following statement amendment(s):
"The number of votes east for the amendment(s) was/were sufficient for approva	ıl
by	
(voting group)	
 ■ The amendment(s) was/were adopted by the board of directors without shareholder ac action was not required. □ The amendment(s) was/were adopted by the incorporators without shareholder action action was not required. November 30, 2018. Dated 	and sharcholder
(By a director, president or other officer – if directors or officer selected, by an incorporator – if in the hands of a receiver, the appointed fiduciary by that fiduciary) Alejandro Onofrio	eers have not been
(Typed or printed name of person signing)	
Authorized Representative	
(Title of person signing)	