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AND THE TOTAL CHARGE

COVER LETTER

TO: Amendment Section Division of Corporations

NAME OF CORPOR.	ATION: CENTRO DE AR	TES GRAFICAS & MYST	ICAS INC
DOCUMENT NUMB	P03000147122		
The enclosed Articles of	<i>f Amendment</i> and fee are su	bmitted for filing.	
Please return all corresp	oondence concerning this ma	tter to the following:	
J	ESUS A. RAMIREZ		
_		Name of Contact Person	1
(CENTRO DE ARTES GRAI	FICAS & MYSTICAS INC	
-		Firm/ Company	_
I	739 SW 8 STREET		
_		Address	
,	MIAMI, FL 33135		
-		City/ State and Zip Cod	e
webpa	geartists(a gmail.com		
	E-mail address: (to be u	sed for future annual report	notification)
For further information	concerning this matter, plea	se call;	
CAMILO A. RAMIRE	Z	305 ar (6460308
Name o	f Contact Person	Area Code & Daytime Telephone Numb	
Enclosed is a check for	the following amount made	payable to the Florida Depa	artment of State:
□ \$35 Filling 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)
Amer Divis P.O.	ing Address idment Section ion of Corporations Box 6327 hassee, FL 32314	Amene Divisio Clifton	Address Iment Section on of Corporations Building Executive Center Circle

2661 Executive Center Circle Tallahassee, FL 32301

Articles of Amendment to Articles of Incorporation of

CENTRO DE ARTES GRAFICAS & MYSTICAS INC

(Name o	f Corporation as currentl	y filed with the Florida Dept, of State)	
P03000147122			
	(Document Number of	Corporation (if known)	~
Pursuant to the provisions of section 607, its Articles of Incorporation:	1006, Florida Statutes, this	Florida Profit Corporation adopts the following	ng amendment(s) t
A. If amending name, enter the new na	me of the corporation:		
	ation "Corp." "Inc." or "	i," "company," or "incorporated" or the c Co". A professional corporation name must P.A."	
B. Enter new principal office address, (Principal office address MUST BE A S.)	if applicable: TREET ADDRESS)		
C. Enter new mailing address, if appli (Muiling address MAY BE A POST of			
D. If amending the registered agent an new registered agent and/or the new			17 HOV 18
Name of New Registered Agent	CAMILO A. RAMIREZ		_ ㅋ 근식
	1739 SW 8TH ST		22 SE
<u>New Registered Office Address:</u>	ıFlorida str MIAMI		Code
New Registered Agent's Signature, if el I hereby accept the appointment as registe	ered agent. I am familiar s Auf A	eith and accept the obligations of the position.	_

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: <u>X</u> Change	<u>PT</u>	<u>John Doe</u>	
X Remove	\underline{V}	Mike Jones	
X Add	<u>sv</u>	Sally Smith	
Type of Action (Check One)	Title	Name	<u>Addres</u> s
1) Change	PD	JESUS A RAMIREZ	1739 SW 8 STREET
Add			MIAMI, FL 33135
X Remove			
2) X Change	D	CAMILO A. RAMIREZ	1739 SW 8 STREET
Add	<u>-</u> .		MIAMI, FL 33135
Remove			
3) Change			
Add			
Remove			
4) Change			
Add			
Remove			
5) Change			
Add			
Remove			
h) Change			
Add			
Remove			

). (Be specific)	
		
<u> </u>		
_		
		
	<u> </u>	
f an amendment provides for an ex-	change, reclassification, or cancellation of issued share	<u>es.</u>
provisions for implementing the ar	nendment if not contained in the amendment itself:	
(if not applicable, indicate N/A)		
(if not applicable, indicate N/4)		
(if not applicable, indicate N/A)		··· <u>·</u> ··
(if not applicable, indicate N/A)		
(if not applicable, indicate N/A)		
(if not applicable, indicate N/A)		
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(if not applicable, indicate N/A)		
(if not applicable, indicate N/A)		
(if not applicable, indicate N/A)		

	11/14/2019	
The date of each amendment(s date this document was signed.) adoption:	if other than th
-	1/14/2019	
Effective date <u>if applicable</u> :		
	(no more than 90 days after amendment file date)	
Note: If the date inserted in the document's effective date on the	is block does not meet the applicable statutory filing requirements, this date will Department of State's records.	I not be listed as th
Adoption of Amendment(s)	(<u>CHECK ONE</u>)	
The amendment(s) was/were by the shareholders was/were	adopted by the shareholders. The number of votes east for the amendment(s) e sufficient for approval.	
	approved by the shareholders through voting groups. The following statement for each voting group entitled to vote separately on the amendmentis):	
"The number of votes e	ast for the amendment(s) was/were sufficient for approval	
by	(voting group)	
	(voting group)	
☐ The amendment(s) was/were action was not required.	adopted by the board of directors without shareholder action and shareholder	
☐ The amendment(s) was/were action was not required.	adopted by the incorporators without shareholder action and shareholder	
11/14/2	019	
DatedSignature	and Phys	
	a director, president or other officer - if directors or officers have not been	
	ected, by an incorporator—if in the hands of a receiver, trustee, or other court ointed fiduciary by that fiduciary)	
арр	omica naderary by that naderary)	
	CAMILO A. RAMIREZ	
	(Typed or printed name of person signing)	
	DIRECTOR	
	(Title of person signing)	