# P03000 153 011

(Re	equestor's Name)	)		
(Ac	ddress)			
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## **COVER LETTER**

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		<b>COVER LETTER</b>		
TO: Amendment Sec Division of Corp				Porcio Parago
NAME OF CORPO	PRATION: MITCHELL'S HO	LDINGS CORP.		
DOCHMENT NUM	IBER: P03000153011			ري الم
		haring dear elling		<i>O</i>
	s of Amendment and fee are su	•		
Please return all corre	espondence concerning this ma	tter to the following:		
	ROLANDO E. LEIVA CPA			
		Name of Contact Persor	1	
	ROLANDO E. LEIVA CPA	PA		
		Firm/ Company		
	7400 SW 50TH TERRACE S	SUITE 302		
	MIAMI, FL 33155	Address		
		City/ State and Zip Code	e	
ROI	LANDO@LEIVA.COM			
	<del>-</del>	sed for future annual report	notification)	
For further information	on concerning this matter, pleas	se call:		
ROLANDO E. LEIV	663-1511			
Name	de & Daytime Telephone Number	_		
Enclosed is a check t	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)	
An Di P.C	nailing Address nendment Section vision of Corporations D. Box 6327 Hahassee, FL 32314	Amend Divisio Clifton 2661 E	Address Iment Section on of Corporations Building Executive Center Circle Eassee, FL 32301	

#### **Articles of Amendment**

# Articles of Incorporation

of

## MITCHELL'S HOLDING CORP.

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

P03000153011

(Document Number of Corporation (if known)

ent(s) to

A. If amending name, enter the new name of the corporation:	The ne				
name must be distinguishable and contain the word "corporatio "Corp.," "Inc.," or Co.," or the designation "Corp." "Inc," or word "chartered," "professional association," or the abbreviation	"Co". A professional corporation name must contain the				
B. Enter new principal office address, if applicable:	9331 S.W. 100 STREET				
(Principal office address <u>MUST BE A STREET ADDRESS</u> )	MIAMI, FL 33176				
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)	9331 S.W. 100 STREET				
	MIAMI, FL 33176				
	_				
D. If amending the registered agent and/or registered office address new registered agent and/or the new registered office address  Name of New Registered Agent					
new registered agent and/or the new registered office addres  Name of New Registered Agent					
new registered agent and/or the new registered office addres  Name of New Registered Agent	reet address)				
Name of New Registered Agent  (Florida st	reet address)				

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: <u>X</u> Change	<u>PT</u>	John Do	<u>e</u>		
X Remove	<u>V</u>	Mike Joi	nes		
X Add	<u>sv</u>	Sally Sm	<u>rith</u>		
Type of Action (Check One)	<u>Title</u>		Name		Address
1) Change	_5		Mitchell	Igel ko	9331 SW 100 S Miami, FL. 33176
Add					Miami, FL. 33176
Remove					
2) Change					
Add					
Remove					<del></del>
3)Change		<del></del>			
Add					
Remove					
4) Change		_	•		<del></del>
Add					
Remove					
5) Change					
Add					
Remove					
6) Change					
Add					<del></del>
Remove					

E. If amending or add	ing additional Ar			<u>re</u> :				
(Attach additional sh	eets, if necessary)	(Be specifi	10	<u> </u>	۱ ۸		حلب	
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F. If an amendment p provisions for imp								
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The does of each encoderate (a) add		NIA	er a a a
The date of each amendment(s) ado date this document was signed.	ption:	NIA	, if other than the
Effective date <u>if applicable</u> :	<u> </u>	- 1	
	(no more than S	90 days after amendment file date)	
Note: If the date inserted in this blodocument's effective date on the Depa		cable statutory filing requirements,	this date will not be listed as the
Adoption of Amendment(s)	( <u>CHECK ONE</u> )		
■ The amendment(s) was/were adopt by the shareholders was/were suffi		e number of votes cast for the amend	lment(s)
☐ The amendment(s) was/were appromust be separately provided for ea		rough voting groups. The following so vote separately on the amendment(s	
"The number of votes cast fo	r the amendment(s) was/we	re sufficient for approval	
by			
	(voting group)		
☐ The amendment(s) was/were adopt action was not required.	ed by the board of directors	s without shareholder action and shar	reholder
☐ The amendment(s) was/were adopt action was not required.	ted by the incorporators with	hout shareholder action and sharehol	lder
DECEMBE	R 6, 2019		
Dated	<del></del>	<del></del>	
Signature (Pun dim	Windows on other of X	icer – if directors or officers have not	A la con
, ,	•	ne hands of a receiver, trustee, or other	
	fiduciary by that fiduciary		CI COMIC
	ELSA GI	ELMAN	
<del>-</del>	(Typed or printed	name of person signing)	
	PF	RESIDENT	
	(Title	of person signing)	