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A. Butter 9/27/21

## **COVER LETTER**

TO: Amendment Section Division of Corporations

.

NAME OF CORPORATION:	A 3	L 133	Corp			
DOCUMENT NUMBER:	P040000	13098				
The enclosed Articles of Amend			ng,			
Please return all correspondence	concerning this mat	ter to the follo	owing:			
	100	A Mai	nzanil	la		
		A. Mai	ontact Person			
		ΑBι	133 (	orp		
	<del></del>	Firm/ C	<u>133 (</u> Company			
	770 Ponce de Leon Blyd Ste 101					
		110	CII C S S			
	$\underline{}$	oral Go	ables,	FL 33134		
		City/ State	and Zip Code			
	105510	aams	palaw	group. com-		
E-ma	il address: (to be us	ed for future a	unital report	notification)		
For further information concerni			<b></b>	02: 11052		
Leo A. Manza	Inilla Parcan	at	( <u>186</u> Area Coe	de & Daytime Telephone Number		
Enclosed is a check for the follo	wing amount made p	payable to the	Florida Depa	artment of State:		
, -	3.75 Filing Fee & rtificate of Status	S43.75 F Certified (Additional enclosed)	Copy il copy is	☐\$52.50 Filing Fee Certificate of Status Certified Copy (Additional Copy is enclosed)		
Mailing Addi Amendment S Division of Co P.O. Box 632 Tallahassee, F	Street Address Amendment Section Division of Corporations The Centre of Tallahassee 2415 N. Monroe Street, Suite 810					

Tallahassee, FL 32303

## Articles of Amendment to Articles of Incorporation of

Figure

to

						- //-
		(Name of C	Corporation as currently	<u>filed with the Florida Do</u>	ept.4868667 13	AH O -
A3L	133	Corp	P040	00073098	Stringe	un 3:50
·	1,50		P040 (Document Number of C	Corporation (if known)	TALLAL	THE STATE
Pursuant to the provisits Articles of Incorpe			06, Florida Statutes, this <i>FI</i>			
A. If amending nam	ie, enter i	the new nam	e of the corporation:			
•						T1
"Inc.," or Co.," or	the desig	mation "Cor <sub>i</sub>	e word "corporation," "copp." "Inc," or "Co". Aprile the abbreviation "P.A."	mpany," or "incorporate professional corporation	d" or the abbrevia name_must_con	tion "Corp.," tain the word
				NIA		
B. <u>Enter new princi</u> ( <i>Principal office addi</i>						
Trincipui vyjice aaai	ress <u>prod</u>	TUCASIR	<u> </u>			
					.=	
C. Entor nout maili	معادات مت	se <b>if</b> applica	blor			
C. Enter new maili. (Mailing address				N/A		
				7		
D 16			on undistant of Consider	oo in Elouido, anton tha		
			or registered office addre registered office address:	ss in Fiorida, eater the i	iame or the	
Name of Nev	a Darrieta	ead Jaant	NA			
<u>Nume of Nev</u>	i negasiei	eu agem		•		<del></del>
			(Florida stree	t address)		<u> </u>
New Register		. 1.1.1.branse			, Florida	
<u>New Register</u>	rea Ogjici	<u> Aaaress</u>	((	Tity)	, 1 1011Ga	ip Code)
				•		
New Registered Age	nt's Sign	ature, if char	nging Registered Agent:			
hereby accept the ap	opointme	n as registere	ed agent. I am familiar wi	th and accept the obligati	ons of the positio	n.
			(I) (N) (N)	and the second second		
			Signature of New Reg	ustered Agent, if changin	ž.	

Check if applicable

The amendment(s) is/are being filed pursuant to s. 607.0120 (11) (e), F.S.

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 Doc 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 Doc, PT as a Change, Mike Jones, V as Remove, and Sally Smith, SV as an Add.

Example: X Change	<u>PT</u>	John Doe	
X Remove	<u>V</u>	Mike Jones	
<u>X</u> Add	<u>sv</u>	Sally Smith	
Type of Action (Check One)	<u>Title</u>	<u>Name</u>	<u>Addres</u> s
1) Change	P	Alex Leiter	6900 Biscayne Blud
Add Remove 2)	P	Leo A. Manzanilla	Stc 8 Miami, FL 33138  170 ponce delcon Blvd  Ste 101  Coral Gables, FL 33131
Add Remove 4) Change			
Add Remove 5) Change Add			
Remove 6)ChangeAddRemove			

Attach <i>additio</i>	r adding additional A nal sheets, if necessary,	). (Be specific)	NA			
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<u>f an amendm</u> provisions fo	ent provides for an ex r implementing the ar	change, reclassif	ication, or cancel	<u>lation of issued s</u> imendment itself	<u>hares,</u> :	
(if not ap	olicable, indicate N/A)				_	
		1/14				
					<u>-</u>	
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		<u>-</u> -		.,		

. . .

	doption:	, if other than the
date this document was signed.		
Effective date <u>if applicable</u> :		
	(no more than 90 days after amendment file date)	
<b>Note:</b> If the date inserted in this bedocument's effective date on the De	lock does not meet the applicable statutory filing requirement partment of State's records.	s, this date will not be listed as the
Adoption of Amendment(s)	( <u>CHECK ONE</u> )	
☐ The amendment(s) was/were add action was not required.	opted by the incorporators, or board of directors without shareho	older action and shareholder
The amendment(s) was/were add by the shareholders was/were su	opted by the shareholders. The number of votes cast for the amosficient for approval.	endment(s)
	proved by the shareholders through voting groups. The following each voting group entitled to vote separately on the amendment	
"The number of votes cast	for the amendment(s) was/were sufficient for approval	
by	··	
•	(voting group)	
selecte	irecor, president or other officer – if directors or officers have a d. by an incorporator – if in the hands of a receiver, trustee, or officers by that fiduciary)  Leo A. Manzanilla  (Typed or printed name of person signing)	
	(Typed or printed name of person signing)	
	Vice President (Title of person signing)	
	(Title of person signing)	

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