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11/9/20

## **COVER LETTER**

**TO:** Amendment Section Division of Corporations

NAME OF CORPORATION:	BOLLINVESTME	NTS CORP					
DOCUMENT NUMBER:	P04000124826						
The enclosed Articles of Amend	ment and fee are sub	omitted for filing.					
Please return all correspondence	concerning this mat	ter to the following	ng:				
	I	JUIS E. FERNAN	NDEZ, ESQ				
		Name of Conta	act Person				
		LUIS E. FERNA	NDEZ. P.A				
		Firm/ Con	npany				
	2525 1	PONCE DE LEO	N BVLD SU	HTE 300			
		Addre	SS				
	CORAL GABLES, FLORIDA 33134						
	City/ State and Zip Code						
	PA	RALEGAL@LE	F-LAW.CO	М			
E-ma	nil address: (to be use	ed for future annu	ual report no	tification)			
For further information concerni	- ,	e call:	305	239-9427			
Name of Contact	Person	(		& Daytime Telephone Number			
Enclosed is a check for the follow	wing amount made p	payable to the Flo	orida Departi	nent of State:			
-	3.75 Filing Fee & rtificate of Status	S43.75 Filing Certified Cop (Additional co enclosed)	ру	S52.50 Filing Fee Certificate of Status Certified Copy (Additional Copy is enclosed)			
Mailing Addr Amendment S Division of Co P.O. Box 6327 Tallahassee, F		Division of The Cent 2415 N.	ent Section of Corporations re of Tallahassee Monroe Street, Suite 810 ee, F1, 32303				

# Articles of Amendment **Articles of Incorporation**

of

FILED

ntly filed with the 24826 of Corporation	2020 OCT - L PM 4: 05 he Florida Dept. of State)  SECRETARY OF STATE  TALL NUASSEE FOR			
24826 of Corporation	SECRETARY OF STATE			
of Corporation				
	(if known) A == A (if A ) A C. T. C.			
	t Corporation adopts the following amendment(s) t			
	The new			
A professional	"incorporated" or the abbreviation "Corp.,"   corporation name must contain the word			
12440 SW	122 ST			
MIAMI, F	MIAMI, FL 33186			
12440 SW	12440 SW 122 ST			
MIAMI, FI	MIAMI, FL 33186			
	a, enter the name of the			
ew registered office address:  LUIS JAVIER BOLINAGA				
1'				
	<del></del> -			
MIAMI . Flo				
(City)	(Zip Code)			
·	·			
	ot the obligations of the position.			
•				
Registered Ages	nt. if changing			
	"company," or A professional I."  12440 SW  MIAMI, F  12440 SW  MIAMI, FI  Idress in Florid: ess: BOLINAGA I' street address)  (City)			

### 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 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: X Change PT John Doe X Remove $\underline{\mathsf{V}}$ Mike Jones <u>X</u> Add SV Sally Smith Type of Action <u>Title</u> <u>Name</u> Address (Check One) PD LUIS BOLINAGA 2865 SW 180TH AVE 1) \_\_\_\_ Change MIRAMAR, FL 33029 \_\_\_ Add Remove SD YNES N BOLINAGA 2865 SW 180TH AVE 2) \_\_\_\_ Change MIRAMAR, FL 33029 Add Remove VD JOSE L BOLINAGA DEL FORN 2865 SW 180TH AVE Change MIRAMAR, FL 33029 Add Remove VD JORGE L BOLINAGA DEL FORN 2865 SW 180TH AVE 4) \_\_\_\_ Change MIRAMAR, FL 33029 Add Remove PD Luis J Bolinaga Del Forn 12440 SW 122 ST Change MIAMI, FL 33186 \_ Add Remove Ð Lourdes M Bolinaga Del Forn 2865 SW 180TH AVE Change MIRAMAR, FL 33029 \_\_ Add Remove

Attach a	dditional shee	g additional A ets, if necessary,	). (Be specif	îc)	-		
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<u>f an am</u> provici	endment pro	vides for an ex menting the an	change, recla	ssification, or	cancellation o	f issued share:	<u>s.</u>
if i	ons tor imple	indicate N/A)	nenament it i	ot contained i	n the amenon	iem usen:	
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	doption:	, if other than
date this document was signed.		
Effective date <u>if applicable</u> :	(no more than 90 days after amendment file date)	<del></del>
	(no more man 30 days after amenament file date)	
<b>Note:</b> If the date inserted in this b document's effective date on the De	lock does not meet the applicable statutory filing requirements, t partment of State's records.	his date will not be listed as
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 shareholde	er 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 amend flicient for approval.	ment(s)
	proved by the shareholders through voting groups. The following steach voting group entitled to vote separately on the amendment(s)	
"The number of votes cast	for the amendment(s) was/were sufficient for approval	
by	<u> </u>	
,	(voting group)	
09/16/2020		
Dated	700 ·	
Signature	nonto acaga	
(By a d	rector, president or other officer – if directors or officers have not it, by an incorporator – if in the hands of a receiver, trustee, or other of fiduciary by that fiduciary)	
	LUIS J. BOLINAGA DEL FORN	
	(Typed or printed name of person signing)	<del></del>
	PRESIDENT/DIRECTOR	
	(Title of person signing)	

the

the