P05000003548

(Re	questor's Name)	
(Ad	dress)	
(Ad	dress)	
(Cit	ry/State/Zip/Phone	: #)
PICK-UP	☐ WAIT	MAIL
(Bu	siness Entity Nan	ne)
	cument Number)	
(50	eument Number)	
Certified Copies	_ Certificates	of Status
Special Instructions to	Filing Officer:	





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SECRETARY OF STATE

BL VORISEK OCT 10 2020

COVER LETTER

TO: Amendment Section Division of Corporations

NAME OF CORPO	RATION: ELITE PREMIUN	4 INC	
	BER: P05000003548		
	of Amendment and fee are s	abmitted for filing.	
Please return all corre	spondence concerning this m	atter to the following:	
	MARIA LORENA ROJAS		
		Name of Contact Perso	n
	ELITE PREMIUM INC		
		Firm/ Company	
	9445 SW 40 STREET, SUIT	E 108	
		Address	
	MIAMI, FLORIDA 33185		
		City/ State and Zip Cod	e
	PREMIUMADVISER@GM	AIL.COM	
	E-mail address: (to be u	sed for future annual report	notification)
For further information	n concerning this matter, plea	se call:	
MARIA LORENA RO	DJAS	at (804-4428
Name o	of Contact Person	Area Co	de & Daytime Telephone Number
Enclosed is a check fo	the following amount made	payable to the Florida Depa	ortment of State:
□ \$35 Filing Fee	■\$43.75 Filing Fee & Certificate of Status	S43.75 Filing Fee & Certified Copy (Additional copy is enclosed)	☐\$52.50 Filing Fee Certificate of Status Certified Copy (Additional Copy is enclosed)
Ame Divis P.O.	ing Address ndment Section sion of Corporations Box 6327 hassee, FL 32314	Amend Divisio The Co	Address ment Section n of Corporations entre of Tallahassee J. Monroe Street, Suite 810

Tallahassee, FL 32303

Articles of Amendment to Articles of Incorporation of

ELITE PREMIUM INC					
(Name of Co	rporation as currentl	y filed with the Florida Dept. of	State)		
P05000003548					
	(Document Number o	f Corporation (if known)			
Pursuant to the provisions of section 607,1006, its Articles of Incorporation:	, Florida Statutes, this	Florida Profit Corporation adopts	s the following	, ameno	iment(s) to
A. If amending name, enter the new name of	of the corporation:				
N/A				The i	##1ti
name must be distinguishable and contain the w "Inc.," or Co.," or the designation "Corp." "chartered," "professional association," or th	" "Inc." or "Co". A	A professional corporation name		n "Cor _l	p., "
B. Enter new principal office address, if app (Principal office address <u>MUST BE A STREI</u>		N/A			_
C. Enter new mailing address, if applicable (Mailing address MAY BE A POST OFF)		N/A	SECRETARY TALLAHA!	2020 AUG 27	Lizano e.izani ezizani
D. If amending the registered agent and/or new registered agent and/or the new regi			SSEE FL	PH 1: 48	-
N/A		<u>i</u>			
Name of New Registered Agent					
	(Florida str	eet address)			
New Registered Office Address:		, Flo	vrid a		
		(City)	(Zip C	ode)	_
New Registered Agent's Signature, if changi I hereby accept the appointment as registered of	ing Registered Agent: agent. I am familiar v	<u>:</u> with and accept the obligations of	the position.		
	Signature of New R	evistered Avent if changing			

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 <u>V</u> Mike Jones <u>X</u> Add <u>SV</u> Sally Smith Type of Action <u>Title</u> <u>Addres</u>s <u>Name</u> (Check One) 1) X Change ORLANDO ANDRES VALENTIN 9445 SW 40 STREET, STE 108 MIAMI, FL 33165 ____ Add __ Remove JUAN SEBASTIAN ROJAS 9445 SW 40 STREET, STE 108 __ Change MIAMI, FL 33165 ____ Add 9445 SW 40 STREET, STE 108 Remove BIANKA VALENTIN 3) \overline{X} Change MIAMI, FL 33165 ____ Add _ Remove 4) ____ Change _____ Add Remove 5) ____ Change ____ Add ____ Remove 6) ____ Change ____ Add ____ Remove

ttach additional sheet.	o, y necessary). (m	e specific)			
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an amendment prov	ides for an exchange	e, reclassification,	or cancellation of	issued shares,	
rovisions for implem	nenting the amendm	<u>ent if not containe</u>	<u>d in the amendme</u>	nt itself:	
(if not applicable,	inaicaie N/A)				
	<u>.</u> .	<u> </u>		-	
					
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			<u>-</u>		
					
<u>.</u>					

07/31/2020
The date of each amendment(s) adoption:, if other than t
date this document was signed.
07/31/2020
Effective date if applicable:
(no more than 90 days after amendment file date)
Note: If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as a document's effective date on the Department of State's records.
Adoption of Amendment(s) (CHECK ONE)
The amendment(s) was/were adopted by the incorporators, or board of directors without shareholder action and shareholder action was not required.
☐ The amendment(s) was/were adopted by the shareholders. The number of votes cast for the amendment(s) by the shareholders was/were sufficient for approval.
☐ The amendment(s) was/were approved by the shareholders through voting groups. The following statement must be separately provided for each voting group entitled to vote separately on the amendment(s):
"The number of votes east for the amendment(s) was/were sufficient for approval
by
(voting group)
Dated Signature (By a director, president or other officer – if directors or officers have not been selected, by an incorporator of in the hands of a receiver, trustee, or other court appointed fiduciary by that fiduciary)
MARIA LORENA ROJAS
(Typed or printed name of person signing)
PRESIDENT
(Title of person signing)