P05000 012 450

| (Reque | stor's Name) |) | | |
|---|---------------|--------------|--|--|
| (Addres | ss) | | | |
| (Addre | ss) | | | |
| (City/S | ate/Zip/Phor | ne #) | | |
| PICK-UP | WAIT | MAIL | | |
| (Busine | ess Entity Na | me) | | |
| (Docum | nent Number |) | | |
| Certified Copies | Certificate | es of Status | | |
| Special Instructions to Filing Officer: | | | | |
| | | | | |
| | | | | |
| | | | | |

Office Use Only



800336637848

1121491454916254963 ***10.60

20 JAN 24 AN IO: 38
SECRETANT OF COLORS

JAN 27 200

COVER LETTER

, 1

TO: Amendment Section Division of Corporations

| NAME OF CORPORATION: Gavilan Manage | ment, Inc | |
|--|--------------------------------|---|
| DOCUMENT NUMBER: P05000012450 | | |
| The enclosed Articles of Amendment and fee are | submitted for filing. | |
| Please return all correspondence concerning this i | natter to the following: | |
| Patrick DiSalvo | | |
| | Name of Contact Persor | <u> </u> |
| DiSalvo & Associates, PLI | LC | |
| | Firm/ Company | |
| 1760 N Jog Rd. #150 | | |
| | Address | |
| West Palm Beach, FL 334 | 11 | |
| | City/ State and Zip Code | |
| Pdisalvo@d-acpa.com | | |
| E-mail address: (to be | used for future annual report | notification) |
| | | |
| For further information concerning this matter, pl | ease call: | |
| Jeannie @ DiSalvo & Associates, PPLC | at (⁵⁶¹ | 659-1177 |
| Name of Contact Person | Area Co |) 659-1177 de & Daytime Telephone Number |
| Enclosed is a check for the following amount made | de payable to the Florida Depa | artment of State: |
| S35 Filing Fee S43.75 Filing Fee & Certificate of Status | | S52.50 Filing Fee Certificate of Status Certified Copy (Additional Copy is enclosed) |
| Mailing Address Amendment Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314 | Amend Divisio The Co | Address Iment Section on of Corporations entre of Tallahassec N. Monroe Street, Suite 810 |

Tallahassee, FL 32303

Articles of Amendment to Articles of Incorporation of

| Gavilan Management, Inc. | | | | |
|---|---|--|--|------------|
| (Name) | of Corporation as curren | tly filed with the Florida Dept. of S | tate) | |
| P05000012450 | | | .* | |
| | (Document Number | of Corporation (if known) | ······ | |
| Pursuant to the provisions of section 607, its Articles of Incorporation: | 1006, Florida Statutes, thi | s Floridu Profit Corporation adopts t | he following amendn | nent(s) to |
| A. If amending name, enter the new m | ame of the corporation: | | | |
| was a second of the second of | | | The ne | |
| name must be distinguishable and contain "Inc.," or Co.," or the designation "Catartered," "professional association," | Corp," "Inc," or "Co". | A professional corporation name n | abbreviation "Corp., nust contain the wor | -d |
| B. Enter new principal office address, if applicable: (Principal office address <u>MUST BE A STREET ADDRESS</u>) | | 1760 N. Jog Road #150 | | |
| | | West Palm Beach, FL 33411 | | |
| | | | 20 J | |
| C. Enter new mailing address, if appl (Mailing address MAY BE A POST | | 1760 N Jog Rd. #150 | AH 24 | |
| | | West Palm Beach, FL 33411 | | |
| | | | <u></u> . | |
| D. If amending the registered agent ar new registered agent and/or the new | nd/or registered office ad w registered office addre | dress in Florida, enter the name of t | the (1) | |
| Name of New Registered Agent | DFS Agent LLC | _ | | |
| <u></u> | 1760 N Jog Rd. #150 | | | |
| | (Florida s | treet address) | | |
| New Registered Office Address: | West Palm Beach | . Flori | 33411 | |
| | | (City) | (Zip Code) | |
| | | | • | |
| New Registered Agent's Signature, if c I hereby accept the appointment as regist | hanging Registered Ager tered agent. I am familiar | nt: with and accept the obligations of the | e position. | |
| | | 20 | | |
| | Signature of New | Registered Agent, if changing | | |

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)

Example:

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.

| X Change | <u> 14</u> | John Doe | |
|-------------------------------|-----------------|---------------------|---------------------------|
| X Remove | \underline{V} | Mike Jones | |
| <u>X</u> Add | <u>sv</u> | Sally Smith | |
| Type of Action (Check One) | Title | <u>Name</u> | <u>Addres</u> s |
| 1) Change | VPS | Juan Carlos Gavilan | 980 N Military Trail |
| Add | | | West Palm Beach, FL 33415 |
| X Remove | | | |
| 2) Change | T . | Maria Elena Frias | 980 N Military Trail |
| Add | | | West Palm Beach, FL 33415 |
| $\frac{X}{X}$ Remove Change | P | Juan Gavilan | ***ADDRESS CHANGE ONLY |
| Add | | | 1760 N Jog Road #150 C |
| Remove | | | West Palm Beach, FL 33411 |
| 4) Change | | | 24 |
| Add | | | |
| Remove | | | |
| 5) Change | | | € |
| Add | | | |
| Remove | | | |
| 6) Change | | | |
| Add | | | |
| Remove | | | |

| f amending or adding additional Articles, enter change(s) here: | | | | |
|--|-------------|---------------|----------------|---|
| Attach additional sheets, if necessary). (Be specific) | | | | |
| | | | _ | |
| | | | | |
| | | | | - |
| | | | | |
| | | | | |
| | | | | _ |
| | | | | _ |
| | | | | |
| Market and the second s | | | | _ |
| | | | | |
| | | | | |
| | | | • | |
| · | | | | _ |
| | | | | |
| | | | | |
| | | | | |
| | | | | |
| | | | | |
| , | | | - - | - |
| | | | | |
| | | 22 | 20 | |
| | | | JÁN | _ |
| | | | ≥ ₹ | |
| an amendment provides for an exchange, reclassification, or cancellation of issued sh | ares. | 22 | 24 | |
| provisions for implementing the amendment if not contained in the amendment itself: | | |) Ton | |
| (if not applicable, indicate N/A) | | 12 | AH 10: | |
| | | | ယ | |
| | d D | | Φ. | |
| | | | | _ |
| | | | | |
| | | | | |
| | | - | • | _ |
| | | | | |
| | | | | |
| | | | | |

| The date of each amendment(s) date this document was signed. | adoption: | , if other than the |
|---|--|--|
| Effective date <u>if applicable</u> : | | |
| | (no more than 90 days after amendment | file date) |
| Note: If the date inserted in this document's effective date on the | block does not meet the applicable statutory filing req Department of State's records. | uirements, this date will not be listed as the |
| Adoption of Amendment(s) | (<u>CHECK ONE</u>) | |
| ☐ The amendment(s) was/were a by the shareholders was/were | dopted by the shareholders. The number of votes cast fo sufficient for approval. | r the amendment(s) |
| | pproved by the shareholders through voting groups. The or each voting group entitled to vote separately on the ac | |
| "The number of votes ca | st for the amendment(s) was/were sufficient for approva | ſ |
| by | (voting group) | |
| | (voting group) | |
| ☐ The amendment(s) is/are bein | g filed pursuant to s. 607.0120 (11) (e), F.S. | |
| The amendment(s) was/were action was not required. | dopted by the incorporators, or board of directors withou | ~ ~ · · · |
| January Dated | 5, 2020 | FILE MARKET OF ARTHUR SEE FOR |
| selec | director, president or other officer—if directors or office ted, by an incorporator—if in the hands of a receiver, truinted figuriary by that fiduciary) | ers have not been 2 = 0 |
| | Juan Gavilan | |
| | (Typed or printed name of person signing) | |
| | President | |
| | (Title of person signing) | |