## P0500012290

| (Re                     | questor's Name)   |             |
|-------------------------|-------------------|-------------|
| (Ad                     | dress)            |             |
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| (Cit                    | ry/State/Zip/Phon | e #)        |
| PICK-UP                 | ☐ WAIT            | MAIL        |
| (Bu                     | rsiness Entity Na | me)         |
| (Do                     | ocument Number)   | )           |
| Certified Copies        | _ Certificate     | s of Status |
| Special Instructions to | Filing Officer:   |             |
|                         |                   |             |
|                         |                   |             |
|                         |                   |             |
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FILED 2018 SEP 26 PM 1: 16 SEUNCIARY OF STATE

C. GOLDEN SEP 2 7 2018

## **COVER LETTER**

TO: Amendment Section Division of Corporations

| NAME OF CORPOR            | ATION: MIAMI BOBCAT   | SERVICES INC  |  |
|---------------------------|---|---|--|
| DOCUMENT NUMBI            | P05000072290  |   |  |
| The enclosed Articles of  | f Amendment and fee are su  | bmitted for filing.   |  |
| Please return all corresp | ondence concerning this ma  | tter to the following:  |  |
| 1                         | ANDRES D HERNANDEZ  |   |  |
| _                         |   | Name of Contact Persor  | 1  |
| ;                         | MIAMI BOBCAT SERVICE  | ES INC  |  |
| -                         |   | Firm/ Company   |  |
| 1                         | 3510 NW 33 AVE  |   |  |
| _                         |   | Address   |  |
| i                         | MIAMI FL 333147   |   |  |
| _                         |   | City/ State and Zip Cod   |  |
| macias                    | @lenymac.com  |   |  |
|                           | E-mail address: (to be us   | sed for future annual report                                      | notification)  |
| For further information   | concerning this matter, plea  | se call:  |  |
| ANDRES D HERNAN           | DEZ   | at ( <u>3</u> 05  | 1 233-4722   |
| Name of                   | Contact Person  | Area Co   | de & Daytime Telephone Number  |
| Enclosed is a check for   | the following amount made   | payable to the Florida Depa                                       | artment of State:  |
| S35 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) |
| Amer<br>Divis<br>P.O. I   | ng Address<br>idment Section<br>ion of Corporations<br>30x 6327<br>nassee, FL 32314 | Amend<br>Divisio<br>Clifton                                       | Address<br>Iment Section<br>on of Corporations<br>Building<br>xecutive Center Circle   |

Tallahassee, FL 32301

## Articles of Amendment to Articles of Incorporation

|   | Articles of Amendment  | rida Dept. of State) of State |
|---|--|---|
|   | to   | 2   |
|   | Articles of Incorporation  | 10/800  |
| NUANU DODGAT SEBUICES INC   | OI   | Ser Sep 20  |
| MIAMI BOBCAT SERVICES INC   |  | To // PM  |
| ( <u>Name of Co</u>   | rporation as currently filed with the Flo  | rida Dept. of State)  |
| P05000072290  |  | ASSEES IN   |
|   | (Document Number of Corporation (if kno  | own)  |
| Pursuant to the provisions of section 607.1006, ts Articles of Incorporation:   | , Florida Statutes, this Florida Profit Corp   | oration adopts the following amendment(s)   |
| A. If amending name, enter the new name o   | f the corporation:   |   |
|   |  | The new   |
| name must be distinguishable and contain t<br>"Corp.," "Inc.," or Co.," or the designation<br>word "chartered," "professional association," | "Corp," "Inc," or "Co". A profession   |   |
| 3. Enter new principal office address, if app   | plicable:  |   |
| Principal office address MUST BE A STREE  |  | <del></del>   |
|   |  |   |
|   |  |   |
|   |  |   |
| C. Enter new mailing address, if applicable   |  |   |
| (Mailing address <u>MAY BE A POST OFFI</u>  | (CE BOX)   | *   |
|   |  |   |
|   |  |   |
|   |  |   |
| N. 16   | annintered offer address in Charita and  | au tha mama of the  |
| <ol> <li>If amending the registered agent and/or<br/>new registered agent and/or the new reg</li> </ol>                                     |  | er the name of the  |
|   | The state of the s |   |
| Name of New Registered Agent  |  | <del></del>   |
|   |  |   |
|   | (Florida street address)   |   |
|   |  |   |
| New Registered Office Address:  |  | , Florida   |
|   | (City)   | (Zip Code)  |
|   |  |   |
|   |  |   |
| New Registered Agent's Signature, if changi   |  |   |
| hereby accept the appointment as registered of  | agent. I am familiar with and accept the e   | obligations of the position.  |
|   |  |   |
|   |  |   |
|   |  |   |
|   | Signature of New Registered Agent, if c  | hanging   |

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             | <u>PT</u>    | John Doe           |                  |
|-------------------------------|--------------|--------------------|------------------|
| X Remove                      | <u>V</u>     | Mike Jones         |                  |
| X Add                         | <u>sv</u>    | Sally Smith        |                  |
| Type of Action<br>(Check One) | <u>Title</u> | Name               | <u>Addres</u> s  |
| 1) Change                     | P            | LAUDELINA DIAZ     | 4001 E 10 AVE    |
| Add X Remove                  |              |                    | HIALEAH FL 33013 |
| Change                        | P            | ANDRES D HERNANDEZ | 8510 NW 33 AVE   |
| X                             |              | <del>-</del>       | MIAMI FL 33147   |
| Remove                        |              |                    |                  |
| 3 ) Change                    |              | _                  |                  |
| Add                           |              |                    |                  |
| Remove                        |              |                    |                  |
| 4) Change                     |              | _                  |                  |
| Add                           |              |                    |                  |
| Remove                        |              |                    |                  |
| 5) Change                     | ···          |                    |                  |
| Add                           |              |                    |                  |
| Remove                        |              |                    |                  |
| 6) Change                     |              |                    |                  |
| Add                           |              |                    |                  |
| Remove                        |              |                    |                  |

| . If amending or adding additional Artic (Attach additional sheets, if necessary). |   |
|--|---|
| N/A  |   |
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| If an amandment provides for an each   | ange, reclassification, or cancellation of issued shares, |
| provisions for implementing the ame  | ndment if not contained in the amendment itself:          |
| (if not applicable, indicate N/A)  |   |
| /A   |   |
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| • • • •   | 09/20/2018   |                                |
|---|--|--------------------------------|
| The date of each amendment(s) a date this document was signed.                            | doption:   | , if other than t              |
| Effective date if applicable:   |  |                                |
|   | (no more than 90 days after amendment file date)   |                                |
| Note: If the date inserted in this lead to the Document's effective date on the Document. | block does not meet the applicable statutory filing requirements, this capartment of State's records.  | date will not be listed as the |
| Adoption of Amendment(s)  | ( <u>CHECK ONE</u> )   |                                |
| The amendment(s) was/were ado<br>by the shareholders was/were so                          | opted by the shareholders. The number of votes cast for the amendmen ifficient for approval.   | i(s)                           |
|   | proved by the shareholders through voting groups. The following states each voting group entitled to vote separately on the amendment(s):  | nent                           |
| "The number of votes cast   | for the amendment(s) was/were sufficient for approval  |                                |
| by  | (voting group)   |                                |
|   | (voting group)   |                                |
| ☐ The amendment(s) was/were addaction was not required.                                   | opted by the board of directors without shareholder action and sharehol  | der                            |
| ☐ The amendment(s) was/were addaction was not required.                                   | opted by the incorporators without shareholder action and shareholder  |                                |
|   | BER 20 2018  |                                |
| DatedSignature  | - All  |                                |
| (By a c<br>selecte  | lirector, president or other officer – if directors or officers have not been<br>d, by an incorporator – if in the hands of a receiver, trustee, or other co<br>ted fiduciary by that fiduciary) |                                |
|   | ANDRES D HERNANDEZ   |                                |
|   | (Typed or printed name of person signing)  | <u> </u>                       |
|   | PRESIDENT  |                                |
|   | (Title of person signing)  |                                |