## P05000082078

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## **COVER LETTER**

TO: Amendment Section Division of Corporations

NAME OF CORPO	ORATION: AMERICAN BOT	TLING SOFTWARE, INC				
DOCUMENT NUM	D05000092078					
The enclosed Article	es of Amendment and fee are su	ibmitted for filing.				
Please return all corr	respondence concerning this ma	atter to the following:				
	JOSE M. MARTINEZ					
		Name of Contact Person	n			
	JM MARTINEZ CPA, PA					
		Firm/ Company				
	2100 PONCE DE LEON BLVD. SUITE 740					
	Address					
	CORAL GABLES, FL 3313-	1				
	City/ State and Zip Code					
	E-mail address: (to be u	sed for future annual report	notification)			
For further informat	ion concerning this matter, plea	se call:				
JOSE M. MARTINEZ		305	4457554			
Name of Contact Person		at (305 ) 4457554  Area Code & Daytime Telephone Number				
Enclosed is a check	for the following amount made	payable to the Florida Depa	artment of State:			
☐ \$35 Filing Fee	☑S43.75 Filing Fee & Certificate of Status	□\$43.75 Filing Fee & Certified Copy (Additional copy is enclosed)	☐\$52.50 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		Street Address Amendment Section Division of Corporations Clifton Building 2661 Executive Center Circle				

Tallahassee, FL 32301

## Articles of Amendment to Articles of Incorporation of

AMERICAN BOTTLING SOFTWARE, INC. (Name of Corporation as currently filed with the Florida Dept. of State) P05000082078 (Document Number of Corporation (if known) Pursuant to the provisions of section 607.1006, Florida Statutes, this Florida Profit Corporation adopts the following amendment(s) to its Articles of Incorporation: A. If amending name, enter the new name of the corporation: name must be distinguishable and contain the word "corporation," "company," or "incorporated" or the abbreviation "Corp.," "Inc.," or Co.," or the designation "Corp.," "Inc.," or "Co". A professional corporation name must contain the word "chartered," "professional association," or the abbreviation "P.A." B. Enter new principal office address, if applicable: (Principal office address MUST BE A STREET ADDRESS ) C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX) D. If amending the registered agent and/or registered office address in Florida, enter the name of the new registered agent and/or the new registered office address: Name of New Registered Agent (Florida street address) New Registered Office Address: (City) (Zip Code) New Registered Agent's Signature, if changing Registered Agent: I hereby accept the appointment as registered agent. I am familiar with and accept the obligations of the position. 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)

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 (Check One)	Title	Name	<u>Addres</u> s
1) Change	D	FRANCISCO JAVIER CORTADA CAM	2100 PONCE DE LEON STE 740
X Add			CORAL GABLES, FL 33134
Remove			
2) Change			
Add			
Remove			
3 ) Change			
Add			
Remove			
4) Change			
Add			<u> </u>
Remove			
5) Change			
Add			
Remove			
6) Change			
Add			<del> </del>
			<del></del>
Remove			

Attach additional sheets, if necessary).	ticles, enter change(s) here: . (Be specific)
	<del></del>
·	
f an amendment provides for an eych	hange, reclassification, or cancellation of issued shares,
<u>provisions for implementing the ame</u>	endment if not contained in the amendment itself:
(if not applicable, indicate N/A)	
<del></del>	· · · · · · · · · · · · · · · · · · ·

The date of each amendment(s) adoption:	, if other than the
ate this document was signed.	
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 delocument's effective date on the Department of State's records.	ate will not be listed as the
Adoption of Amendment(s) (CHECK ONE)	
☐ The amendment(s) was/were adopted by the shareholders. The number of votes cast for the amendment(by the shareholders was/were sufficient for approval.	(s)
☐ The amendment(s) was/were approved by the shareholders through voting groups. The following statem must be separately provided for each voting group entitled to vote separately on the amendment(s):	ent
"The number of votes cast for the amendment(s) was/were sufficient for approval	
by"  (voting group)	
(voting group)	
The amendment(s) was/were adopted by the board of directors without shareholder action and sharehold action was not required.	ler
☐ The amendment(s) was/were adopted by the incorporators without shareholder action and shareholder action was not required.	
10/19/2018 Dated	
Signature	
(By a director, president or other officer – if directors or officers have not been selected, by an incorporator – if in the hands of a receiver, trustee, or other cou appointed fiduciary by that fiduciary)	
Oscar Cortada Alías (Typed or printed name of person signing)	
DIRECTOR / PRESIDENT	

(Title of person signing)