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2018 OCT -4 AM 5: OS SEGRETANY OF STATE

R. WHITE

OCT 17 2018

COVER LETTER

TO: Amendment Section Division of Corporations

NAME OF CORPOR	ATION: A.S COALITION	CORPORATION	
DOCUMENT NUMB			
The enclosed Articles of	f Amendment and fee are su	ibmitted for filing.	
Please return all corresp	nondence concerning this ma	tter to the following:	
,	AURELIO SALGADO		
-		Name of Contact Perso	n
-		Firm/ Company	
:	5499 SE CELESTIAL CIRC	LE	
-	<u> </u>	Address	
5	STUART, FL 34997		
_	_	City/ State and Zip Cod	e
salgado	od88@yahoo.com		
	E-mail address: (to be us	sed for future annual report	notification)
For further information	concerning this matter, pleas	se call:	
AURELIO SALGADO	•	at (215-3467
Name o	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:
□ \$35 Filing Fee	■\$43.75 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)
Amer Divis P.O. 1	ng Address adment Section ion of Corporations Box 6327 nassee, FL 32314	Amend Divisio Clifton 2661 E	Address Iment Section on of Corporations Building executive Center Circle assec, FL 32301

Articles of Amendment to Articles of Incorporation of



A.S. COALITION CORPORATION

2018 OCT -4 AM 5: 05

	is currently filed with the Florida Dept. of State)
P05000088295	TALLATIA SSE STAT
(Document	Number of Corporation (if known)
Pursuant to the provisions of section 607.1006, Florida Staits Articles of Incorporation:	stutes, this Florida Profit Corporation adopts the following amendment(s)
A. If amending name, enter the new name of the corporate	<u>ration:</u>
	The new corporation," "company," or "incorporated" or the abbreviation
"Corp.," "Inc.," or Co.," or the designation "Corp," "i vord "chartered," "professional association," or the abbi	Inc," or "Co". A professional corporation name must contain the reviation "P.A."
B. Enter new principal office address, if applicable:	
Principal office address <u>MUST BE A STREET ADDRES</u>	<u>SS</u>)
Enter new mailing address, if applicable:	
(Muiling address <u>MAY BE A POST OFFICE BOX</u>)	
 If amending the registered agent and/or registered of new registered agent and/or the new registered office 	
Name of New Registered Agent	
	(Florida street address)

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.

X Change	<u>PT</u> <u>Jo</u>	hn Doe	
X Remove	<u>V</u> <u>M</u>	ike Jones	
\underline{X} Add	<u>SV</u> <u>Sa</u>	ally Smith	
Type of Action (Check One)	Title	Name	<u>Addres</u> s
1) Change	<u>s</u>	JUANA YANEZ	5499 SE CELESTIAL CIRCLE
Add			STUART, FL 34997
X Remove			
2) Change	S	JUANA SALGADO	5499 SE CELESTIAL CIRCLE
X Add			STUART, FL 34997
Remove			
3) Change	0	DANIEL SALGADO	5499 SE CELESTIAL CIRCLE
Add			STUART, FL 34997
X Remove			
4) Change	0	AURELIO SALGADO	5499 SE CELESTIAL CIRCLE
Add			STUART, FL 34997
X Remove			
5) Change			
Add			
Remove			
6) Change			
Add			
Remove			

(Attach a	ding or adding additional Articles, enter change(s) here: additional sheets, if necessary). (Be specific)	
		_
		—
	0 10021	
provisi	nendment provides for an exchange, reclassification, or cancellation of issued shares, ons for implementing the amendment if not contained in the amendment itself:	
(i)	not applicable, indicate N/A)	

The date of each amendment(s) adoption:	, if other than the
date this document was signed.	, if other than the
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 document's effective date on the Department of State's records.	will not be listed as the
Adoption of Amendment(s) (<u>CHECK ONE</u>)	
■ 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 cast for the amendment(s) was/were sufficient for approval	
by	
(voting group)	
☐ The amendment(s) was/were adopted by the board of directors without shareholder action and shareholder action was not required.	
☐ The amendment(s) was/were adopted by the incorporators without shareholder action and shareholder action was not required.	
10/01/2018 Dated	
Signature AURCIO SOCIGADO	
(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 court	
appointed fiduciary by that fiduciary)	
AURELIO SALGADO	
(Typed or printed name of person signing)	
PRESIDENT	
(Title of person signing)	