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SECRETARY OF STAIL
TALLAHASSEE, FLORIFA

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## **COVER LETTER**

**TO:** Amendment Section Division of Corporations

NAME OF CORPORATION: LPH4 INC.			
DOCUMENT NUMI			
	of Amendment and fee are su	bmitted for filing.	
Please return all corres	spondence concerning this ma	ter to the following:	
	Sofia Powell-Cosio		
		Name of Contact Person	1
	SOFIA POWELL-COSIO, P.		
	<u>.                                    </u>	Firm/ Company	
	1900 SW 3rd Avenue	Time Company	
		Address	
	Miami, FL 33129		
		City/ State and Zip Cod	e
sncm	gmtservices@gmail.com		
E-mail address: (to be used for future annual report notification)			
For further information	n concerning this matter, pleas		579-9988
Name	of Contact Person	at (	de & Daytime Telephone Number
Name	of Confact Person	Alea Co	de & Daytime Telephone Number
Enclosed is a check for	r 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)
Amo Divi P.O	iling Address endment Section ision of Corporations Box 6327 ahassee, FL 32314	Ameno Divisio Clifton 2661 E	Address Iment Section on of Corporations Building Executive Center Circle assee, FL 32301

## Articles of Amendment to Articles of Incorporation of

LPH4 INC.	
(Name of Corporation	on as currently filed with the Florida Dept. of State)
P06000023873	
(Docum	ent Number of Corporation (if known)
Pursuant to the provisions of section 607.1006, Florida its Articles of Incorporation:	Statutes, this Florida Profit Corporation adopts the following amendment(s)
A. If amending name, enter the new name of the co	rporation:
	The new
	d "corporation," "company," or "incorporated" or the abbreviation ""Inc," or "Co". A professional corporation name must contain the
B. Enter new principal office address, if applicable:	
(Principal office address <u>MUST BE A STREET ADD</u>	RESS)
C. Enter new mailing address, if applicable:	<b>場合 5</b> 「
(Mailing address <u>MAY BE A POST OFFICE BO)</u>	
	<u> </u>
	<u> </u>
D. If amending the registered agent and/or register	
new registered agent and/or the new registered of	office address:
Name of New Registered Agent	
<del></del>	(Florida street address)
New Registered Office Address:	, Florida
	(City) (Zip Code)
New Registered Agent's Signature, if changing Regi	istered Agent: I am familiar with and accept the obligations of the position.
, mosept me appearances us regimered agent	- many many water of the positions of the positions
Signo	ature 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 Remove         Y         Mike Jones           X Add         SV         Sally Smith           Type of Action (Check One)         Title         Name         Address           1) Change         Add         Suite 2311           Add         Suite 2311         Miami, FL 33131           2) Change         Miguel Pinkas         1900 SW 3rd Avenue           Add         Remove         Miami, FL 33129           Add         Remove         Add           Add         Remove         Add           Add         Add         Add	X CI	nange	PT	John Doe	
Type of Action (Check One)         Title (Check One)         Name         Address           1) Change Add	<u>X</u> Re	emove	<u>v</u>	Mike Jones	
(Check One)         1) Change       Add       Suite 2311         Add       Miami, FL 33131         2) Change       Miguel Pinkas       1900 SW 3rd Avenue         Add       Miami, FL 33129         Add       Add	<u>X</u> A	.dd	<u>sv</u>	Sally Smith	
Add			<u>Title</u>	Name	Address
Miami, FL 33131   Miguel Pinkas   1900 SW 3rd Avenue	1)	Change	DPST	Loretta Fabricant	100 Southeast Second Street
Change   DPST   Miguel Pinkas   1900 SW 3rd Avenue   Miami, FL 33129		Add			Suite 2311
Change   Miami, FL 33129   Miami, FL 33129	<u>x</u>	Remove			Miami, FL 33131
AddRemove 3)ChangeAddRemove 4)ChangeAddRemove 5)ChangeAdd	2)	Change	DPST	Miguel Pinkas	1900 SW 3rd Avenue
3) Change	<u>x</u>	Add			Miami, FL 33129
AddRemove  4)Change		Remove			
	3)	Change		<del>-</del>	
4) Change		Add			
Add		Remove			
Remove	4) _	Change			
5) Change		Add			
Add	-	Remove			
	5)	Change			
Remove		Add			
		Remove			
6) Change	6)	Change			
Add	<i>o</i> )				
Remove					

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an amendment provides for an eyel	hange, reclassification, or cancellation of issued shares,
provisions for implementing the ame (if not applicable, indicate N/A)	endment if not contained in the amendment itself:
()	
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The date of each amendmen		, if other than the
date this document was signed Effective date if applicable:	December 21, 2016	
	(no more than 90 days after amendment file date)	
	this block does not meet the applicable statutory filing requirements, this date the Department of State's records.	will not be listed as the
Adoption of Amendment(s)	( <u>CHECK ONE</u> )	
	are adopted by the shareholders. The number of votes cast for the amendment(s) are sufficient for approval.	
	re approved by the shareholders through voting groups. The following statement ed for each voting group entitled to vote separately on the amendment(s):	
"The number of vote	s cast for the amendment(s) was/were sufficient for approval	
by	(voting group)	
☐ The amendment(s) was/we action was not required.	ere adopted by the board of directors without shareholder action and shareholder	
☐ The amendment(s) was/we action was not required.	ere adopted by the incorporators without shareholder action and shareholder	
Dece Dated	ember 21, 2016	
Signature _	Myrel Prolain	
() S	By a director, president or other officer – if directors or officers have not been elected, by an incorporator – if in the hands of a receiver, trustee, or other court appointed fiduciary by that fiduciary)	
	Miguel Pinkas	
	(Typed or printed name of person signing)	
	D/P/S/T	
	(Title of person signing)	<del></del>