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To:

Division of Corporations

Fax Number

: (850)617-6380

From:

Account Name : BROWARD SOHO SERVICES INC.

Account Number : I20100000080 Phone : (954)366-3850

: (954)633-7850 Fax Number

**Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please. **

COR AMND/RESTATE/CORRECT OR O/D RESIGN JARP, CORP

Certificate of Status	0,
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SEP 0 9 2020

S. YOUNG

Electronic Filing Menu Corporate Filing Menu

Help

TO: Amendment Section

To:

COVER LETTER

Division of Corpor	ations			
NAME OF CORPORA	ATION:JARP CORP			
DOCUMENT NUMBI	20-5910130			
The enclosed Articles of	f Amendment and fee are sul	bmitted for filing.		
Please return all corresp	ondence concerning this man	iter to the following	g :	
þ	ATRICIA LOAIZA			
_	,,,,,	Name of Contac	ı Person	
J	ARP CORP			
		Firm/ Comp	any	
3	303 S PORT ROYAL DRIV	'E APT 503		<u> </u>
_		Address		
F	ORT LAUDERDALE, FL 3	3308		
_		City/ State and Z	Zip Code	
p	attyloaiza@live.com			
.	E-mail address: (to be us	ed for future annua	l report n	otification)
For further information	concerning this matter, pleas	se call:		
PATRIČIA LOAIZA		at (954) 687-6731
Name of	Contact Person	م	Area Code	& Daytime Telephone Number
Enclosed is a check for	the following amount made	payable to the Flori	da Depar	tment of State
\$35 Filing Fee	S43.75 Filing Fee & Certificate of Status	S43.75 Filing I Certified Copy (Additional cop enclosed)		OS52.50 Filing Fee Certificate of Status Certified Copy (Additional Copy is enclosed)
Amer Divis P.O. 1	ng Address idment Section ion of Corporations Box 6327 nassee, FL 32314		Division The Cer 2415 N	ddress nent Section .of Corporations otre of Tallahassee . Monroe Street, Suite 810 see, FL 32303

	Articles of Am	endment	
	Articles of Am	енинен	
:	Articles of Inco of	rporation	
, I	JARP COF	₹P	
. (Name o	Corporation as currently	filed with the Florida	Dept. of State)
·	P060001423	42	
:	(Document Number of	Corporation (if known)	
Pursuant to the provisions of section 607.1 its Articles of Incorporation:	1006, Florida Statutes, this F	lorida Profit Corporati	on adopts the following amendment(s) t
A. If amending name, enter the new na	me of the corporation:		
:			The new
name must be distinguishable and contain "Inc.," or Co.," or the designation "C "chartered," "professional association,"	orp," "Inc." or "Co". A	ompany," or "incorpora professional corporati	nied" or the abbreviation "Corp.," on name must contain the word
B. Enter new principal office address, (Principal office address <u>MUST BE A S.</u>	if applicable: TREET ADDRESS)		
			·
			1
C. Enter new mailing address, if appli (Mailing address MAY BE A POST)	cable: OFFICE BOX)	3303 S PORT ROYA	DRIVE APT 503
•		FORT LAUDERDAL	É, FL 33308
:			
		 	
D. If amending the registered agent an	nd/or registered office addr	ess in Florida, enter th	e name of the
new registered agent and/or the new	PATRICIA LOAIZA	<u>.</u>	
Name of New Registered Agent	***************************************		<u> </u>
· .	3303 S PORT ROYAL DR		<u>}</u>
·	(Florida sir	eet address)	33308
New Registered Office Address:	FORT LAUDERDALE	//Cibil	, Florida (Zip Code)
		(City)	(my cine)
New Registered Agent's Signature, if c I hereby accept the appointment as regis.	lered agent. I am jamiliar v	vith and accept the oblig	
	// SignatOre of New R	egistered Agent, if chan	ging
Check if applicable The amendment(s) is/are being filed p	v oursuant-to's, 607,0120 (11)	(e), F.S.	•

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From: Amelia Basso

Fax: 19546337850

Example:

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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>	John Doe	
\underline{X} Remove	<u>V</u>	Mike Jones	Ĭ
X Add	<u>sv</u>	Salty Smith	
Type of Action (Check One)	Title	Name	<u>Addres</u> s
: 1)Change	P	JOSE A ROJAS	3623 INVERRARY BLVD W
Add			LAUDERHILL, FL 33319
X Remove	Р	'PATRICIA'LOAIZA	3303 S PORT ROYAL DRIVE
2) Change X Add		***************************************	APT 503
Remove 3) Change	VP	PATRICIA LOAIZA	FT LAUDERDALE, FL 33308 3623 INVERRARY BLVD W
Add			LAUDERHILL, FL 33319
X Remove			
4) Change			
Add			
Remove			
5) Change			
Add			
Remove			<u>}</u>
6)Change			
Add			
Remove			

Eram.	Amelia	Derea	

Eav.	19546337	REA

To:

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ach additional sheets, if necessary). (Be specific)	
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	op The state of the state of th
	<u>.</u>
n amendment provides for an exchange, reclassification, or ovisions for implementing the amendment if not contained	cancellation of issued shares, in the amendment itself:
(if not applicable, indicate N/A)	
,	
	<u> </u>
	<u> </u>
· .	

(Typed or printed name of person signing)

(Title of person signing)

appointed fiduciary by that fiduciary)

JOSE A ROJAS

PRESIDENT