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#### COVER LETTER

TO: Amendment Section Division of Corporations

NAME OF CORPORATION: CAMACHO ALF, Inc. DOCUMENT NUMBER: PO6000144.558

The enclosed Articles of Amendment and fee are submitted for filing.

Please return all correspondence concerning this matter to the following:

Damaso Bello
Name of Contact Person
CAMacho ALF, INC
1631 SW 14 St
Address
Miani, FL 33145 City/ State and Zip Code
' City/ State and Zip Code
CAMACHOALF 220 gmail.com

E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

at (<u>386</u>) <u>2430030</u> Area Code & Daytime Telephone Number Name of Contact Person

Enclosed is a check for the following amount made payable to the Florida Department 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

<u>Street Address</u> Amendment Section Division of Corporations The Centre of Tallahassee 2415 N. Monroe Street, Suite 810 Tallahassee, FL 32303

## Articles of Amendment to Articles of Incorporation of

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(Name of Corporation as currently	filed with the Florida Dept. of State)	
P060001445	58	
(Document Number of C	Corporation (if known)	
Pursuant to the provisions of section 607.1006, Florida Statutes, this <i>Fl</i> its Articles of Incorporation:	lorida Profit Corporation adopts the following	g amendment(s) to
A. If amending name, enter the new name of the corporation:		
		The new
name must be distinguishable and contain the word "corporation," "con "Inc.," or Co.," or the designation "Corp." "Inc," or "Co". A p "chartered," "professional association." or the abbreviation "P.A." B. Enter new principal office address, if applicable: (Principal office address <u>MUST BE A STREET ADDRESS</u> )	professional corporation name must contain	t the word
C. <u>Enter new mailing address, if applicable:</u> (Mailing address <u>MAY BE A POST OFFICE BOX</u> )		
D. If amending the registered agent and/or registered office address: <u>new registered agent and/or the new registered office address</u> : <u>Name of New Registered Agent</u> <u>17945 SN 93</u> (Florida street <u>New Registered Office Address</u> : <u>New Registered Office Address</u> : <u>(Contemporture</u> )	Ruiz	1 26 PH 12: 07

<u>New Registered Agent's Signature, if changing Registered Agent:</u> I hereby accept the appointment as registered agent. I am familiar with and accept the obligations of the position.

C Signature & New Registered Agent, if changing

Check if applicable

The amendment(s) is/are being filed pursuant to s. 607.0120 (11) (c), F.S.

# 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:

John Doe

Sally Smith

Name

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.

Geisel J Ruiz

### Example: X Change

<u>X</u> Add

,

PT
----

<u>sv</u>

Title

Y Mike Jones X Remove

(Check One)

1)	 Change

Add

\_\_\_ Remove

2) \_\_\_\_ Change

\_\_\_\_\_ Add

3) \_\_\_\_ Remove

\_\_\_\_ Add

\_\_\_\_ Remove

4) \_\_\_\_ Change

\_\_\_\_ Add

\_\_\_\_ Remove

5/ \_\_\_\_ Change

\_\_\_\_ Add

\_\_\_\_ Remove

6) \_\_\_\_ Change

\_\_\_\_ Add

\_\_\_ Remove

Address 1 AVE Abt 450

E. <u>If amendin</u>	or adding additional An tional sheets, if necessary)	rticles, enter chang	e(s) here:		
(Attach add	ional sneets, ij necessary)	(De specific)			
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	lment provides for an ex	ahanan realassifia	tion or concellation	n of issued shares	
nrovision	for implementing the an	nendment if not co	ntained in the amen	dment itself:	
(if not	applicable, indicate N/A)				
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The date of each amendment(s) adoption:, if othe date this document was signed.	er than the
Effective date if applicable: October 01,2020 (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 will not be listed as the document's effective date on the Department of State's records.

Adoption of Amendment(s)

(CHECK ONE)

- The amendment(s) was/were adopted by the incorporators, or board of directors without shareholder action and shareholder action was not required.
- 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) 7070 Dated = upa Signature (By a prector, president or other difficer - 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) (Typed or printed name of person signing)

<sup>(</sup>Title of person signing)