## P06000150949

(Re	questor's Name)	
(Ad	dress)	<del></del> .
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(Cit	y/State/Zip/Phone	e #)
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(Do	cument Number)	
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08/15/2023

23 JUL 14 RH 5: 3

## **COVER LETTER**

**TO:** Amendment Section Division of Corporations

NAME OF CORPO	RATION: PROLINE ENTER	PRISES, INC.	
DOCUMENT NUM	BER:	·····	
	of Amendment and fee are su	bmitted for filing.	
Please return all corre	spondence concerning this ma	tter to the following:	
	ANDRES RODRIGUEZ ME	ENDOZA	
		Name of Contact Persor	1
	PROLINE ENTERPRISES, I	NC.	
		Firm/ Company	
	12190 NW 99 AVE	· ····································	
	·	Address	
	HIALEAH GARDENS, FL 3	3018	
		City/ State and Zip Code	2
	zeniaalfonso8@gmail.com		
	E-mail address: (to be us	sed for future annual report	notification)
For further informatio	n concerning this matter, pleas JEZ MENDOZA	se call:at (786	319-8879
Name	of Contact Person	ar ( Area Co	de & Daytime Telephone Number
	or the following amount made		•
■ \$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		Street Address Amendment Section Division of Corporations The Centre of Tallahassee 2415 N. Monroe Street, Suite 810	
iali	ahassee, FL 32314		ssee, FL 32303

## Articles of Amendment to Articles of Incorporation of

PROLINE ENTERPRISES, INC.		
(Name o	of Corporation as currently filed with the Florida Dept. of State	)
P06000150949		
	(Document Number of Corporation (if known)	
Pursuant to the provisions of section 607, its Articles of Incorporation:	1006, Florida Statutes, this Florida Profit Corporation adopts the f	ollowing amendment(s) t
A. If amending name, enter the new n	ame of the corporation:	
		The new
	n the word "corporation," "company," or "incorporated" or the abb Corp," "Inc," or "Co". A professional corporation name must or the abbreviation "P.A."	
B. Enter new principal office address, (Principal office address <u>MUST BE A S</u>		
C. Enter new mailing address, if apple (Mailing address MAY BE A POST)  D. If amending the registered agent an new registered agent and/or the new registered	nd/or registered office address in Florida, enter the name of the	23 JUL 11, 14, 5: 4
Name of New Registered Agent		\tilde{\dots} \tilde{\dots} \tilde{\dots}
	12190 NW 99 AVE	= .
	(Florida street address)	
New Registered Office Address:	HIALEAH GARDENS , Florida 3	3018
	(City)	(Zip Code)
New Registered Agent's Signature, if c I hereby accept the appointment as regist	hanging Registered Agent: tered agent. I am familiar with and accept the obligations of the po	isition.
<del>.</del>	Signature of New Registered Agent, if changing	<del></del>

Check if applicable

<sup>☐</sup> The amendment(s) is/are being filed pursuant to s. 607.0120 (11) (e), 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)

Example:

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 Doc	
X Remove	<u>v</u>	Mike Jones	
X Add	<u>sv</u>	Sally Smith	
Type of Action (Check One)	<u>Title</u>	<u>Name</u>	Address
1) Change			
Add			· · · · · · · · · · · · · · · · · · ·
Remove			
2) Change			
Add			
Remove 3) Change			
Add			
Remove			
4) Change			
Add			
Remove			
5) Change			
Add			
Remove			
6) Change	-		
Add			
Remove			

E. If amending or adding additional Articles, enter change(s) here: (Attach additional sheets, if necessary). (Be specific) NEW ADDRESS FOR PRESIDENT ANDRES RODRIGUEZ MENDOZA
12190 NW 99 AVE HIALEAH GARDENS, FL 33018
12170 IVW 77 AVE HIMLEMI CAMBEROLI E 350 IV
F. If an amendment provides for an exchange, reclassification, or cancellation of issued shares,
provisions for implementing the amendment if not contained in the amendment itself:  (if not applicable, indicate N/A)
(g not uppressive, material 1971)

	07/06/2023	
The date of each amer		, if other than the
date this document was	signed.	
	07/06/2023	
Effective date if applic	cable:  (no more than 90 days after amendment file date)	
	(no more than 90 days after amenament fae date)	
	rted in this block does not meet the applicable statutory filing requirements, ate on the Department of State's records.	this date will not be listed as the
Adoption of Amendme	ent(s) (CHECK ONE)	
The amendment(s) vaction was not requi	was/were adopted by the incorporators, or board of directors without sharehold red.	ler action and shareholder
	was/were adopted by the shareholders. The number of votes cast for the amen was/were sufficient for approval.	dment(s)
	was/were approved by the shareholders through voting groups. The following provided for each voting group entitled to vote separately on the amendment(	
"The number of	of votes cast for the amendment(s) was/were sufficient for approval	
by	."	
	(voting group)	
	07/06/2023	
Dated		
Signa	nure andrew Rodriger Hendora	
	(By a director, president or other officer – if directors or officers have no selected, by an incorporator – if in the hands of a receiver, trustee, or oth appointed fiduciary by that fiduciary)	
	ANDRES RODRIGUEZ MENDOZA	
	(Typed or printed name of person signing)	
	PRESIDENT	
	(Title of person signing)	