P67000021337

(Requestor's Name)
(Address)
(/idaless)
(Address)
(City/State/Zip/Phone #)
PICK-UP WAIT MAIL
(Business Entity Name)
(Document Number)
(Bocoment Number)
Certified Copies Certificates of Status
Special Instructions to Filing Officer:

Office Use Only



700440462697

12/03/24--01029--006 **35.00

2024 DEC -3 PM 1: 59 SECRETARY OF STATE TALLAMASSEE, FL



COVER LETTER

TO: Amendment Section Division of Corporations

NAME OF CORPOR	RATION: X & Z SERVICES	CORP.			
DOCUMENT NUME					
The enclosed Articles	of Amendment and fee are sul	bmitted for filing.			
Please return all corres	spondence concerning this mat	tter to the following:			
	SONIA L. CASTILLO				
		Name of Contact Person			
		Firm/ Company			
	14470 S W 71 LN				
	Address				
	MIAMI. FLORIDA 33183				
		City/ State and Zip Code			
	BESSY70@GMAIL.COM				
	E-mail address: (to be us	ed for future annual report	notification)		
For further information	n concerning this matter, pleas	e call:			
Sonia CASTILLO		786	2003730		
Name (of Contact Person	Area Coo	ie & Daytime Telephone Number		
Enclosed is a check for	r the following amount made p	payable to the Florida Depa	rtment of State:		
■ \$35 Filling Fee	S43.75 Filing Fee & Certificate of Status	\$43.75 Filing Fee & Certified Copy (Additional copy is enclosed)	S52.50 Filing Fee Certificate of Status Certified Copy (Additional Copy is enclosed)		
Ame Divi P. C	ting Address andment Section sion of Corporations DBox 6327 ahassee, FL 32314	Amendo Division The Ce 2415 N	Address ment Section n of Corporations entre of Tallahassee 1. Monroe Street, Suite 810 ssee, FL 32303		

Articles of Amendment to Articles of Incorporation of

X & Z SERVICES CORP.	
· · · · · · · · · · · · · · · · · · ·	currently filed with the Florida Dept. of State)
P07000021337	
(Document N	Number of Corporation (if known)
Pursuant to the provisions of section 607.1006, Florida Stati its Articles of Incorporation:	utes, this Florida Profit Corporation adopts the following amendment(s) to
A. If amending name, enter the new name of the corpor	ration:
N/A	The new
	ation," "company," or "incorporated" or the abbreviation "Corp.," "Co". A professional corporation name must contain the word
B. Enter new principal office address, if applicable: (Principal office address MUST BE A STREET ADDRES)	N/A
C. Finter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)	N/A
	SECF TAA
If amending the registered agent and/or registered of new registered agent and/or the new registered office.	
Name of New Registered Agent N/A	~~~~
Nume of New Keytsterea Agent	SEE, FL
(1	Florida street address)
New Registered Office Address:	(City) , Florida (Zip Code)
New Registered Agent's Signature, if changing Registered I hereby accept the appointment as registered agent. I am	
N/A	
Signature	of New Registered Agent, if changing

Check if applicable

☐ 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)

_ Remove

Please note the officer/director title by the first letter of the office title.

 $P \rightarrow President$; 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 Change	PT Joh	n Doe		
X Remove	<u>V</u> <u>Mil</u>	ke Jones		
X Add	<u>SV Sat</u>	ly Smith		
Type of Action (Check One)	Title	<u>Name</u>	<u>Addres</u> s	
1) Change	AMBR	GERMAN A. SILVESTRO SR.	14470 SW 71 LN	
Add			MIAMI FI. 33183	_
X Remove				
2) Change				
Add				-S ~
Remove 3) Change				EC 824
Add				DEC -
Remove			AS	
4) Change				
Add) - 59 - 59
Remove				_ Lu
5) Change				_
Add				
Remove				_
6) Change				_
Add				_

m	N/A	, if other than the
The date of each amendment(s) ad late this document was signed.	option:	·
Effective date if applicable:		
	(no more than 90 days after amendment file date)	
Note: If the date inserted in this bl document's effective date on the De	ock does not meet the applicable statutory filing requirements, this department of State's records.	ate will not be listed as the
Adoption of Amendment(s)	(<u>CHECK ONE</u>)	
The amendment(s) was/were ado action was not required.	pted by the incorporators, or board of directors without shareholder act	ion and shareholder
The amendment(s) was/were ado by the shareholders was/were su	pted by the shareholders. The number of votes cast for the amendment flicient for approval.	(s)
The amendment(s) was/were app must be separately provided for	roved by the shareholders through voting groups. The following statem each voting group entitled to vote separately on the amendment(s):	ાર ા
"The number of votes cast	for the amendment(s) was/were sufficient for approval	
by	(voting group)	
	(voting group)	
Dated	129/24	2024 DEC SECRET TALL/
Signature	oxia Callyo	EC -3
(By a d	irector, president or other officer - if directors or officers have not beer	E AAA -3
selecte	d, by an incorporator – if in the hands of a receiver, trustee, or other conted fiduciary by that fiduciary)	: A
аррош		음을 호
	SONIA L. CASTILLO	<u> </u>
	(Typed or printed name of person signing)	TAT FL 59
	אס	
	(Title of person signing)	