P07000055529

(Requestor's Name)	
(Address)	
(Address)	
,	
(City/State/Zip/Phone #)	
(City/State/Zip/#110file #)	
PICK-UP WAIT MA	AL.
(Business Entity Name)	
(Document Number)	
Certified Copies Certificates of Status	
Special Instructions to Filing Officer:	

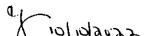




900390748789

67/11/22--01015--028 **35.00





<u>COVER LETTER</u>

TO: Amendment Section Division of Corporations

NAME OF CORPO	RATION: Lelos Enterprises C	Corp		
DOCUMENT NUM	D07000055520			
The enclosed Articles	of Amendment and fee are su	bmitted for filing.		
Please return all corre	spondence concerning this ma	tter to the following:		
	Jose Yapor ⊅			
		Name of Contact Per	son	
	Lelos Enterprises Corp			
		Firm/ Company		
	1270 Saxon Blvd #103			
		Address		
	Orange City, Florida, 32763			
		City/ State and Zip C	ode	
	lelosbbq@gmail.com			
	E-mail address: (to be us	sed for future annual rep	ort notification)	
For further information	on concerning this matter, pleas	se call:	8783717	
Name	of Contact Person		Code & Daytime Telephone Number	
Enclosed is a check for	or the following amount made	payable to the Florida D	epartment of State:	
S35 Filing Fee	☐\$43.75 Filing Fee & Certificate of Status	S43.75 Filing Fee & Certified Copy (Additional copy is enclosed)		
Mailing Address			eet Address	
Am	nendment Section	Amendment Section		
	vision of Corporations	Division of Corporations		
). Box 6327	The Centre of Tallahassee		
Tal	llahassee FL 32314	241	5 N. Monroe Street, Suite 810	

Tallahassee, FL 32303

Articles of Amendment to Articles of Incorporation of

LELO'S ENTERPRISES CORPORATION

ELEC'S ENTERN MOES COM CHARION	2072 00 11 50 12 1
(Name of Corporation as current	tly filed with the Florida Dept. of State)
P07000055529	
(Document Number	of Corporation (if known)
Pursuant to the provisions of section 607.1006, Florida Statutes, this its Articles of Incorporation:	s Florida Profit Corporation adopts the following amendment(s) to
A. If amending name, enter the new name of the corporation:	
	Thenew
name must he distinguishable and contain the word "corporation," "Inc.," or Co.," or the designation "Corp," "Inc," or "Co". "chartered," "professional association," or the abbreviation "P.A.	A professional corporation name must contain the word
B. Enter new principal office address, if applicable:	
(Principal office address <u>MUST BE A STREET ADDRESS</u>)	1270 saxon Blvd #103
	Orange City, Fl., 32763
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)	
D. If amending the registered agent and/or registered office adenew registered agent and/or the new registered office address	dress in Florida, enter the name of the
(Florida s	treet address)
New Registered Office Address:	. Florida
	(City) (Zip Code)
New Registered Agent's Signature, if changing Registered Agen I hereby accept the appointment as registered agent. I am familian	nt: r with and accept the obligations of the position.
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)

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 Change	<u>PT</u>	John Doe	
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	D	Karime M Yapor	1270 Saxon Blvd 103
x Add			Orange City, Fl. 32763
Remove			
2) Change			
Add			
Remove 3) Change			
Add			
Remove			
4) Change			
Add			
Remove			
5) Change			
Add			- pa-
Remove			
6) Change			
Add			
Remove			

Attach additional sheets, if necessar	<mark>Articles, enter char</mark> y). <i>(Be specific)</i>	-			
					_
					
	<u> </u>				
		.	<u>.</u>		
			-		
If an amendment provides for an	exchange, reclassif	ication, or cance	llation of issued sl	nares,	
provisions for implementing the	amendment if not	contained in the	amendment itself:	<u>.</u>	
(if not applicable, indicate N/A	l)				
				<u> </u>	
		-			

The date of each amendment(s date this document was signed.) adoption:	, if other than the
date this document was signed.		
Effective date if applicable:	(no more than 90 days after amendment file date)	
	(no more than 90 days after amendment fite date)	
Note: If the date inserted in thi document's effective date on the	s block does not meet the applicable statutory filing requirements, the Department of State's records.	is date will not be listed as the
Adoption of Amendment(s)	(<u>CHECK ONE</u>)	
■ The amendment(s) was/were action was not required.	adopted by the incorporators, or board of directors without shareholder	action and shareholder
☐ The amendment(s) was/were by the shareholders was/were	adopted by the shareholders. The number of votes cast for the amendnes ufficient for approval.	nent(s)
	approved by the shareholders through voting groups. The following sta- for each voting group entitled to vote separately on the amendment(s):	itement
"The number of votes of	ast for the amendment(s) was/were sufficient for approval	
by		
	(voting group)	
sele	a director, president or other officer – if directors or officers have not be cted, by an incorporator – if in the hands of a receiver, trustee, or other binted fiduciary by that fiduciary)	
	Jose Yapor	
	(Typed or printed name of person signing)	
	VP	
	(Title of person signing)	