PONCOE598/

(Rec	questor's Name)	
(Ado	dress)	
(Add	dress)	
(City	y/State/Zip/Phone	; #)
PICK-UP	☐ WAIT	MAIL
(Bus	siness Entity Nan	ne)
(Dod	cument Number)	
Certified Copies	_ Certificates	of Status
Special Instructions to I	Filing Officer:	

Office Use Only



600318819926

10/03/16--01008--033 **35.00

OCT 1 5 2018 S. YOUNG 18 0CT -3 PK 4:

COVER LETTER

Clifton Building 2661 Executive Center Circle

Tallahassee, FL 32301

TO: Amendment Section Division of Corporations

P.O. Box 6327 Tallahassee, FL 32314

AME OF CORPORATION: Amordo's ALF Inc
OCUMENT NUMBER: POTOCOOS ALI TIC
ne enclosed Articles of Amendment and fee are submitted for filing.
ease return all correspondence concerning this matter to the following:
Hugo Ameroe Name of Contact Person
Name of Contact Person
Firm/ Company
3415 W IVY ST
Tampa FL 33607 City/ State and Zip Code
E-mail address: (to be used for future annual report notification)
or further information concerning this matter, please call:
Name of Contact Person at (813) 900 4611 Area Code & Daytime Telephone Number
nclosed is a check for the following amount made payable to the Florida Department of State:
\$35 Filing Fee Certificate of Status Certificate of Status Certificate of Status Certified Copy (Additional copy is enclosed) Certified Copy (Additional Copy is enclosed)
Mailing AddressStreet AddressAmendment SectionAmendment SectionDivision of CorporationsDivision of Corporations
Division of Corporations

Articles of Amendment

to

Articles of Incorporation

	of	•		
Amoedos	ALF I	nc		
Amoedos POT 00055981	oration as currently	filed with the Florid	a Dept. of State)	
		Corporation (if knows	ı)	
Pursuant to the provisions of section 607.1006. Fits Articles of Incorporation:	Torida Statutes, this I	Horida Profit Corpord	ution adopts the fo	Howing amendment(s) to
A. If amending name, enter the new name of t	the corporation:			
				The new
name must be distinguishable and contain the "Corp.," "Inc.," or Co.," or the designation "word "chartered," "professional association," o	Corp," "Inc," or "C or the abbreviation "I	o". A professional o		
B. Enter new principal office address, if appli (Principal office address MUST BE A STREET				
				80 T
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE)	<u>E BOX</u>)			-3 P
D. If amending the registered agent and/or renew registered agent and/or the new regist			he name of the	e: 17
Name of New Registered Agent				
	(Florida stre	et address)		
New Registered Office Address:			Florida	
New Register Office Plantess.	(City)	, 1 1011da	(Zip Code)
New Registered Agent's Signature, if changing I hereby accept the appointment as registered ag		ith and accept the obl	igations of the pos	ition.
	(人)			
	Signature of New Re	gistered Agent, if cha	nging	<u> </u>

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	PT John Doe	
X Remove	<u>V</u> <u>Mike Jones</u>	
X Add	<u>SV</u> <u>Sally Smith</u>	
Type of Action (Check One)	<u>Title</u> Name	<u>Addres</u> s
1) Change	P yaddres Amordo	3313 W
_X Add		Ivy ST
Remove		Tampa FL 33607
2) X Change	V Hugo Amoedo	3313 W
Add	7	Ivy ST
Remove		Tampa F1 33607
3) 🔀 Change	A marilys Delake	3313 4
Add	7	In 84
Remove		Jampa F1 33607
4) Change		
Add		
Remove		
5) Change		
Add		
Remove		
6) Change		
Add		
Remove		

f amending or adding additional Art Attach additional sheets, if necessary).	(Be specific)			
			<u> </u>	
		<u></u>		
				··· -
			,	
				_
f an amendment provides for an exc provisions for implementing the am (if not applicable, indicate N/A)	hange, reclassificatio endment if not contai	n, or cancellation o	f issued shares, ent itself:	
			<u> </u>	
		<u></u>		
			<u></u>	

The date of each amendment(s) adoption:	_, if other than the
date this document was signed.	
Effective date if applicable:	
Effective date if applicable: (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 document's effective date on the Department of State's records.	not be listed as the
Adoption of Amendment(s) (CHECK ONE)	
☐ 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 east for the amendment(s) was/were sufficient for approval	
by" (voting group)	
(voting group)	
The amendment(s) was/were adopted by the board of directors without shareholder action and shareholder action was not required.	
☐ The amendment(s) was/were adopted by the incorporators without shareholder action and shareholder action was not required.	
Dated9/18/16	
Dated 9/18/18 Signature	
Signature (By a director, president or other officer – 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)	
(Typed or printed name of person signing)	
President	
(Title of person signing)	_