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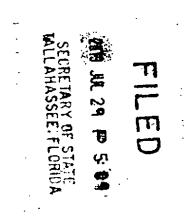
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#### **COVER LETTER**

**TO:** Amendment Section Division of Corporations

| NAME OF CORPOR           | ATION: L& M CORPORA                         | TION DBA BEST AIR SO  | DLUTIONS   |
|--------------------------|---|---|--|
| DOCUMENT NUMB            | P07000075681                                |   |  |
| The enclosed Articles    | of Amendment and fee are su                 | bmitted for filing.   |  |
| Please return all corres | pondence concerning this mat                | tter to the following:  |  |
|                          | LAZARO ISMAEL                               |   |  |
| •                        |   | Name of Contact Person  | n  |
|                          |   | Firm/ Company   | · · · · · · · · · · · · · · · · · · ·  |
|                          | 2555 NW 102 AVENUE. SU                      | JITE 104  |  |
| •                        |   | Address   |  |
|                          | DORAL, FL 33172                             |   |  |
| •                        |   | City/ State and Zip Cod   | c  |
| Lisma                    | el@bestairsolutions.com                     |   |  |
|                          | E-mail address: (to be us                   | sed for future annual report                                      | notification)  |
| For further information  | n concerning this matter, pleas             | se call:  |  |
| Lazaro Ismael            |   | 786<br>at (   | 251.5463   |
| Name o                   | of Contact Person                           | Area Co   | de & Daytime Telephone Number  |
| Enclosed is a check for  | r the following amount made                 | payable to the Florida Depa                                       | artment of State:  |
| □ \$35 Filing Fee        | ☐\$43.75 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) |
| <u>Mai</u>               | ling Address                                | Street  | Address  |
| Ame                      | ndment Section                              |   | Iment Section  |
| Division of Corporations |   | Division of Corporations  |  |
|                          |   |   |  |
| Ame<br>Divi<br>P.O.      | ndment Section                              | Street<br>Ameno<br>Divisio<br>Cliftor                             | is enclosed)  Address  Iment Section   |

Tallahassee, FL 32301

#### Articles of Amendment to Articles of Incorporation of

## FILED



|   | Seath ant The Di BA   |
|---|---|
| (Name of Corporation as curren  | lly filed with the Florida Dept. of State)  |
| I & M CORPORATION DBA BEST AIR SOLUTIONS  | Ily filed with the Florida Dept. of State SECRETARY OF STATE FALLAHASSEE, FLORIDA |
|   | of Corporation (if known)   |
| Pursuant to the provisions of section 607.1006, Florida Statutes, this its Articles of Incorporation:   | Florida Profit Corporation adopts the following amendment                         |
| A. If amending name, enter the new name of the corporation:   |   |
|   | The new   |
| name must be distinguishable and contain the word "corporati<br>"Corp.," "Inc.," or Co.," or the designation "Corp," "Inc," or<br>word "chartered," "professional association," or the abbreviation | "Co". A professional corporation name must contain the                            |
| B. Enter new principal office address, if applicable:   | 2555 NW 102 AVENUE. SUITE 104   |
| (Principal office address MUST BE A STREET ADDRESS)   | DORAL, FL 33172.  |
|   |   |
| C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)   | 2555 NW 102 AVENUE. SUITE 104   |
|   | DORAL, FL 33172.  |
| D. If amending the registered agent and/or registered office add new registered agent and/or the new registered office address  |   |
|   |   |
| Name of New Registered Agent  |   |
| (Florida s  | treet address)  |
| triorium s  | reer uuur essy  |
| 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 familiar  |   |
|   | ·····   |
| Signature of New  | Registered Agent, if changing   |

### 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 Do  | <u>c</u>     |                 |
|-------------------------------|--------------|----------|--------------|-----------------|
| X Remove                      | <u>V</u>     | Mike Jo  | nes          |                 |
| X Add                         | <u>sv</u>    | Sally Sn | n <u>ith</u> |                 |
| Type of Action<br>(Check One) | <u>Title</u> |          | Name         | <u>Addres</u> s |
| 1) Change                     |              | _        |              |                 |
| Add                           |              |          |              |                 |
| Remove                        |              |          |              |                 |
| 2) Change                     |              |          |              |                 |
| Add                           |              |          |              |                 |
| Remove                        |              |          |              |                 |
| 3 ) Change                    |              | _        |              |                 |
| Add                           |              |          |              |                 |
| Remove                        |              |          |              |                 |
| 4) Change                     |              | _        |              |                 |
| Add                           |              |          |              |                 |
| Remove                        |              |          |              |                 |
| f) Chance                     |              |          |              |                 |
| 5) Change                     | -            |          |              |                 |
| Add                           |              |          |              |                 |
| Remove                        |              |          |              |                 |
| 6) Change                     |              |          | <del></del>  |                 |
| Add                           |              |          |              |                 |
| Remove                        |              |          |              |                 |

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|  |   |             |
|  | inge, reclassification, or cancellation of issued shares, dment if not contained in the amendment itself: |             |
| (if not applicable, indicate N/A)  |   |             |
| RANSFER SHARES: TEN (10) SHAR  | ES.   |             |
| ROM: LAZARO ISMAEL   |   |             |
| ROW. LAZARO ISMALL   |   |             |
| TO: MARCELO G ARNEDO.  |   |             |
|  | <u> </u>  |             |
| TO: MARCELO G ARNEDO.  | · · · · · · · · · · · · · · · · · · ·   |             |
| ΓΟ: MARCELO G ARNEDO.  13150 NW MIAMI CT.  |   |             |

| MAY 31, 2019   |                      |
|--|----------------------|
| The date of each amendment(s) adoption: date this document was signed.   | _, if other than the |
| 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 cast 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.   |                      |
| JULY 25, 2018 Dated  |                      |
| Signature  | <del>_</del>         |
| (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)   |                      |
| LAZARO ISMAEL  |                      |
| (Typed or printed name of person signing)  |                      |
| PRESIDENT  |                      |
|  |                      |

(Title of person signing)