P080000167288

| (Requestor's Name) | | | |
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COVER LETTER

TO: Amendment Section Division of Corporations

| NAME OF CORPORA | ATION: TRANSEAGLE M | ULTI SERVICES, CORP | | |
|---------------------------------|----------------------------------------------------------------------------|--------------------------------------------------------------------|----------------------------------------------------------------------------------------|--|
| DOCUMENT NUMBI | ER: | | | |
| The enclosed Articles of | f Amendment and fee are sul | bmitted for filing. | • | |
| Please return all corresp | ondence concerning this mat | ter to the following: | | |
| J | IOSE M. VALENTIN | | | |
| | · · · · · · · · · · · · · · · · · · · | Name of Contact Person | | |
| TRANSEAGLE MULTI SERVICES, CORP | | | | |
| _ | | Firm/ Company | | |
| 2 | 2100 WEST 68TH STREET, | STE. 2128 | | |
| _ | | Address | | |
| I | HIALEAH, FLORIDA 33016 | 6 | | |
| - | | City/ State and Zip Code | | |
| ivalent | in2574@gmail.com | | | |
| | • • | sed for future annual report i | notification) | |
| | | | , | |
| For further information | concerning this matter, pleas | se call: | | |
| JOSE M. VALENTIN | | at (305 | 822-5458 | |
| Name of Contact Person | | Area Code & Daytime Telephone Number | | |
| Enclosed is a check for | the following amount made | payable to the Florida Depa | rtment 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) | |
| Ame Divis P.O. | ing Address ndment Section sion of Corporations Box 6327 shassee, FL 32314 | Amend Divisio Clifton 2661 E | Address ment Section n of Corporations Building xecutive Center Circle assee, FL 32301 | |

Articles of Amendment to Articles of Incorporation of

TRANSEAGLE MULTI SERVICES, CORP

| (Name of Corporation as currently file P08000067288 (Document Number of Corporation as currently file P08000067288) | | | | |
|--------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|--------------------------------------------------------------|--|--|--|
| | | | | |
| Pursuant to the provisions of section 607.1006, Florida Statutes, this Florida | rporation (if known) | | | |
| its Articles of Incorporation: | rida Profit Corporation adopts the following amendment(s) to | | | |
| A. If amending name, enter the new name of the corporation: | | | | |
| NOT APPLICABLE | The new | | | |
| name must be distinguishable and contain the word "corporation," "Corp.," "Inc.," or Co.," or the designation "Corp," "Inc," or "Co" word "chartered," "professional association," or the abbreviation "P.A. | A professional corporation name must contain the | | | |
| B. Enter new principal office address, if applicable: | 2100 WEST 68TH STREET | | | |
| (Builtain al. office address MUCT BE A CTREET ADDRESS) | SUITE 2128 | | | |
| - | HIALEAH, FLORIDA 33016 | | | |
| C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX) | 2100 WEST 68TH STREET | | | |
| | SUITE 2128 | | | |
| • | HIALEAH, FL 33016 | | | |
| D. If amending the registered agent and/or registered office address new registered agent and/or the new registered office address: | in Florida, enter the name of the | | | |
| Name of New Registered Agent NOT APPLICABLE | | | | |
| | | | | |
| | address) | | | |
| (Florida street | | | | |
| (Florida street New Registered Office Address: | , Florida | | | |

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.

| <u>X</u> Change | <u>PT</u> | John Doe | | |
|----------------------------|-----------|---------------------|-------------------------|--|
| X Remove | <u>v</u> | Mike Jones | | |
| <u>X</u> Add | <u>sv</u> | Sally Smith | | |
| Type of Action (Check One) | Title | Name | <u>Addres</u> s | |
| 1) Change | VP | RÓXANA P. MATAMOROS | 2353 S.W. 102 AVENUE | |
| Add | | | MIRAMAR, FL 33025 | |
| X Remove | | | | |
| 2) Change | SEC | SAUL A. MARTINEZ | 2353 S.W. 102 AVENUE | |
| Add | | | MIRAMAR, FL 33025 | |
| X Remove | | | | |
| 3) X Change | VP | JOSE M. VALENTIN | 105 N.W. 208 STREET | |
| Add | | | MIAMI GARDENS, FL 33169 | |
| Remove | | | | |
| 4) Change | | _ | | |
| Add | | · | | |
| Remove | | | | |
| 5) Change | | | | |
| Add | | | | |
| Remove | | | | |
| 6) Change | | | | |
| Add | | | | |
| Remove | | | | |

| E. If amending or adding additional Arti (Attach additional sheets, if necessary). | cles, enter change | e(s) here: | | | | |
|---------------------------------------------------------------------------------------|---------------------------------------|----------------|----------------|----------------------------------------|-------------|--|
| · · · · · · · · · · · · · · · · · · · | (De specific) | | | | | |
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| F. If an amendment provides for an exc | hange reclassific | ntian areune | ellation of is | sued shares | | |
| provisions for implementing the ame | endment if not co | ntained in the | amendmen | t itself: | | |
| (if not applicable, indicate N/A) | | | | | | |
| NOT APPLICABLE | | | | | | |
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| 01/14/2017 | |
|-----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|---------------------------------------------------------------------------------------------------------------------------|
| The date of each amendment(s) adoption: | , if other than the |
| date this document was signed. | |
| 01/14/2017 | |
| Effective date if applicable: (no mor | re than 90 days after amendment file date) |
| Note: If the date inserted in this block does not meet to document's effective date on the Department of State's re- | ne applicable statutory filing requirements, this date will not be listed as the cords. |
| Adoption of Amendment(s) (CHECK ON | HE) |
| ■ The amendment(s) was/were adopted by the sharehold by the shareholders was/were sufficient for approval. | ers. The number of votes cast for the amendment(s) |
| ☐ The amendment(s) was/were approved by the shareho must be separately provided for each voting group en | |
| "The number of votes cast for the amendment(s) | · |
| by(voting group | |
| (voting group |)) |
| ☐ The amendment(s) was/were adopted by the board of action was not required. ☐ The amendment(s) was/were adopted by the incorpora action was not required. | |
| 01/14/2017 Dated | · |
| Signature Main H Val | utun |
| | other officer – if directors or officers have not been – if in the hands of a receiver, trustee, or other court iductary) |
| MARIA H. VALEN | TIN |
| (Typed o | r printed name of person signing) |
| PRESIDENT | |
| | (Title of person signing) |