P080000 72/30

(Req	uestor's Name)	
(Add	ress)	
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2019 HAY 30 PH 12: 55

C. GOLDEN
JUN 1 9 2019

COVER LETTER

ΓΟ: Amendment Section Division of Corporations		
NAME OF CORPORATION: <u>LRC3</u> LORP		
DOCUMENT NUMBER: PD800072/30		
The enclosed Articles of Amendment and fee are submitted for filing.		
Please return all correspondence concerning this matter to the following:		
SIGRID MORALES Name of Contact Person		
12555 BISCAYNE Blud #934		
NORTH MIAML FL 33181 City State and Zip Code		
SIGRID MORALES @ BELLSOUTH, NET E-mail address: (to be used for future annual report notification)		
or further information concerning this matter, please call:		
SIGRID MORALES 786, 423-6656		
Name of Contact Person Area Code & Daytime Telephone Number		
nclosed is a check for the following amount made payable to the Florida Department of State:		
S35 Filing Fee Certificate of Status Certified Copy (Additional copy is enclosed) S43.75 Filing Fee Certified Copy (Additional Copy is enclosed)		
Mailing Address Amendment Section Street Address Amendment Section		

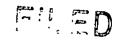
Division of Corporations

Tallahassee, FL 32314

P.O. Box 6327

Amendment Section Division of Corporations Clifton Building 2661 Executive Center Circle Tallahassee, FL 32301

Articles of Amendment to Articles of Incorporation



2019 HAY 30 PH 12: 55

(Name of Corporation as currently filed with the Florida Dept. of State)

its Articles of Incorporation:		
A. If amending name, enter the new name of the cor	rporation:	
		The new
name must be distinguishable and contain the word "Corp." "Inc.," or Co.," or the designation "Corp.," word "chartered," "professional association," or the a	" "Inc." or "Co" A profession	or "incorporated" or the abbreviation
B. Enter new principal office address, if applicable: (Principal office address <u>MUST BE A STREET ADD</u>)	RESS)	
C. Enter new mailing address, if applicable: (Mailing address <u>MAY BE A POST OFFICE BOX</u>	<u></u>	
		
D. If amending the registered agent and/or registere new registered agent and/or the new registered o	ed office address in Florida, er	nter the name of the
Name of New Registered Agent		
	tFlorida street addressi	
New Registered Office Address:		, Florida
	(Cuy)	(Zip Code)
New Registered Agent's Signature, if changing Regis	stered Agent:	
I hereby accept the appointment as registered agent = 1	am familiar with and accept the	e obligations of the position
	ture of New Registered Agent, if	. ,

If amending the Officers and/or Directors, enter the title and name of each officer/director being removed and title, name, an 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

 $P = President, \ \widetilde{V} = Vice President; \ \widetilde{T} = Treasurer, \ S = Secretary, \ D = Director, \ TR = Trustee; \ C = Chairman or Clerk, CEO = Chief Executive Officer, CFO = Chief Financial Officer = If an officer director holds more than one title, list the first letter of each officheld President, Treasurer, Director would be PTD$

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> Joh	ın Doe	
X Remove		ke Jones	
_X Add		ly Smith	
Type of Action (Check One)	Title	Name	<u>Addres</u> s
1) Change	<u>\</u>	CIARA BEVEA	12555 Biscayne Bludte
Add Remove			VorthMirmiFC 33181
2) Change	\bigvee	SIGRID MORALES	12555 BISCAUNE BLUD #9
Add Remove 3.) Change Add	<u>S</u>	Roger Morales	NORTH MIAM, FC 33181 12555 DISCAYAR DWD #934 NOLTH WIAMI FC 3340
Remove 4) Change Add	<u>S</u> _	SIGRID MOTALES	NONTH MIAMI K 33HI
Remove Change Add			
Remove 6) Change Add Remove			

E. If amending or adding additional Articles, enter change(s) here:	
(Attach additional sheets, if necessary) (Be specific)	
	<u> </u>
F. If an amendment provides for an exchange, reclassification, or cancellation of issued shares,	
provisions for implementing the amendment if not contained in the amendment itself	
(if not applicable, indicate NA)	
	` .

The date of each amendment(s) adoption:	, if other than th
Effective date if applicable:	
tno more than 90 days after amendment fi	le dater
Note: If the date inserted in this block does not meet the applicable statutory filing requidocument's effective date on the Department of State's records.	irements, this date will not be listed as the
Adoption of Amendment(s) (CHECK ONE)	
☐ The amendment(s) was/were adopted by the shareholders. The number of votes east for by the shareholders was/were sufficient for approval.	the amendment(s)
☐ The amendment(s) was/were approved by the shareholders through voting groups. The famust be separately provided for each voting group entitled to vote separately on the amendment(s) was/were approved by the shareholders through voting group entitled to vote separately on the amendment(s).	ollowing statement endment(s)
"The number of votes cast for the amendment(s) was/were sufficient for approval	
by	
(voting group)	
The amendment(s) was/were adopted by the board of directors without shareholder action action was not required.	n and shareholder
☐ The amendment(s) was/were adopted by the incorporators without shareholder action and action was not required.	i shareholder
Dated_ 5 22 19	
Signature Survive M Nalos	
(By a director, president or other officer – if directors or officer, selected, by an incorporator – if in the hunds of a receiver, trust appointed fiduciary by that fiduciary)	s have not been ee, or other court
SIGRID MORALES	
(Typed or printed name of person signing)	
PRESIDENT	
(Title of narrow similar)	