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TO SECULOR SESSION STATES OF SECULOR S



FLORIDA DEPARTMENT OF STATE Division of Corporations

June 1, 2017

MIMI BARED BARED AND ASSOCIATES, PA 201 ALHAMBRA CIRCLE, SUITE 601 CORAL GABLES, FL 33134

SUBJECT: HEAVENLY VIEW PROPERTIES CO.

Ref. Number: P08000072879

We have received your document and check(s) totaling \$210.00. However, the enclosed document has not been filed and is being returned to you for the following reason(s):

The document you submitted has been prepared pursuant to nonprofit statutes (chapter 617, Florida Statutes). As the entity was originally filed as a corporation for profit, this document should be filed pursuant to chapter 607, Florida Statutes.

We are enclosing the proper form(s) with instructions for your convenience.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6050.

Susan Tallent Regulatory Specialist II

Letter Number: 017A00011025

COVER LETTER

TO: Amendment Section Division of Corporations

NAME OF CORPO	DRATION: Heavently View P	roperties Co.	
DOCUMENT NUM	IBER: P08000072879		
	s of Amendment and fee are su	ibmitted for filing.	
Please return all corr	espondence concerning this ma	itter to the following:	
	Mimi Bared		
		Name of Contact Perso	n
	Bared and Associates, PA		
		Firm/ Company	
	201 Alhambra Circle, Suite (501	
		Address	.
	Coral Gables, FL. 33134		
		City/ State and Zip Cod	· ·
min	ni@baredlaw.com		
	E-mail address: (to be us	sed for future annual report	notification)
		·	
For further information	on concerning this matter, pleas	se call:	
Mimi Bared		at (666-6010
Name	of Contact Person	Area Co	de & Daytime Telephone Number
Enclosed is a check f	or the following amount made i	payable to the Florida Depa	artment of State:
S35 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)
An	niling Address nendment Section rision of Corporations	Amend	Address Iment Section of Corporations
). Box 6327 Jahassee, FL 32314	Clifton	Building xecutive Center Circle

Tallahassee, FL 32301

Articles of Amendment to Articles of Incorporation of

D. If amending the registered agent and/or registered office address in Florida, enter the name of the new registered agent and/or the new registered office address: Name of New Registered Agent Pablo R. Bared, Esq. 201 Alhambra Circle, Suite 601 (Florida street address) Coral Gables 22124	Heavenly View Properties Co.				
(Document Number of Corporation (if known) Pursuant to the provisions of section 607,1006. Florida Statutes, this Florida Profit Corporation adopts the following amendment(s) to its Articles of Incorporation: The new mane must be distinguishable and contain the word "corporation." "company," or "incorporated" or the abbreviation "Corp.," "Inc.," or Co.," or the designation "Corp.," "Inc.," or Co.," or the designation "Corp.," "Inc.," or Co., a professional association, or the abbreviation "P.A." B. Enter new principal office address, if applicable: (Principal office address MUST BE A STREET ADDRESS) Coral Gables, FL. 33134 C. Enter new mailing address if applicable: (Mailing address MAY BE A POST OFFICE BON) D. Hamending the registered agent and/or registered office address in Florida, enter the name of the new registered agent and/or the new registered office address: Name of New Registered Agent Pablo R. Bared, Esq. Pablo R. Bared, Esq. Florid Gables Florida street address Florid Gables Florida street address Florida street address		of Corporation as currer	itly filed with the Florida Dept. of St.	ate)	
Pursuant to the provisions of section 607,1006. Florida Statutes, this Florida Profit Corporation adopts the following amendment(s) to its Articles of Incorporation: A. If amending name, enter the new name of the corporation: The new manner must be distinguishable and contain the word "corporation," "company," or "incorporated" or the abbreviation "Corp.," "Inc.," or "Co". A professional corporation name must contain the word "chartered," "professional association," or the abbreviation "P.A." B. Enter new principal office address, if applicable: (Principal office address MUST BE A STREET ADDRESS) Coral Gables, FL. 33134 Coral Gables, FL. 33134 D. If amending the registered agent and/or registered office address in Florida, enter the name of the new registered agent and/or the new registered office address: Name of New Registered Agent Pablo R. Bared, Esq. 201 Alhambra Circle, Suite 601 (Florida street address) Ford Gables.	P08000072879				
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name must be distinguishable and contain the word "corporation." "company," or "incorporated" or the abbreviation "Corp.," "lnc.," or Co.," or the designation "Corp.," "lnc.," or "Co.". A professional corporation name must contain the word "chartered," "professional association," or the abbreviation "P.A." B. Enter new principal office address, if applicable: (Principal office address MUST BE A STREET ADDRESS) Coral Gables, FL. 33134 C. Enter new mailing address, if applicable: (Muiling address MAY BE A POST OFFICE BOX) Coral Gables, FL. 33134 D. If amending the registered agent and/or registered office address in Florida, enter the name of the new registered agent and/or the new registered office address: Name of New Registered Agent Pablo R. Bared, Esq. 201 Alhambra Circle, Suite 601 (Florida street address)	A. If amending name, enter the new n	ame of the corporation:			
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D. If amending the registered agent and/or registered office address in Florida, enter the name of the new registered agent and/or the new registered office address: Name of New Registered Agent Pablo R. Bared, Esq. 201 Alhambra Circle, Suite 601 (Florida street address) Cord Gables 22121			Coral Gables, FL. 33134	7.4.8.7 7.4.8.8.7 7.4.8.8.8.8.8.8.8.8.8.8.8.8.8.8.8.8.8.8.	=
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Name of New Registered Agent Pablo R. Bared, Esq.			Coral Gables, FL. 33134		
201 Alhambra Circle, Suite 601 (Florida street address) Coral Gables 22121				<u>ne</u>	
201 Alhambra Circle, Suite 601 (Florida street address) Coral Gables 22121	Name of New Registered Agent	Pablo R. Bared, Esq.			
Coral Gables 22121		201 Alhambra Circle, St	rite 601		
Vanc Randstanied Offices, Johnson Coral Gables		(Florida :	street address)		
<u>New Negroteur Opper Arabress.</u>	New Registered Office Address;	Coral Gables , Florida 331		33134 la	
(Cny) (Zip Code)					
	New Registered Agent's Signature, if c I hereby accept the appointment as regist	ered agent. I am familio	with and hecept the obligations of the Registered Agent, if changing	position	

Page 1 of 4

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.

X Change	<u>PT</u> <u>John</u>	n Doc	
X Remove	<u>V</u> <u>Mik</u>	re Jones	
X Add	SV Sall	y Smith	
Type of Action (Check One)	<u>Title</u>	<u>Name</u>	<u>Addres</u> s
l) Change	D	Consulting Services of S. Fl Inc.	2121 Ponce de Leon Blvd
X Add			Suite 1050
Remove			Coral Gables, FL. 33134
2) Change	P	Gustavo J. Garcia Montes	2333 Brickell Avenue
Add			A-1
X Remove			Miami, Fl. 33129
3) Change			,
Add			
Remove			
4) Change			
Add			
Remove			
5) Change	-		
Add			
Remove			
6) Change			
Add			
Remove			

(Attach <i>additta</i>	er adding additional A mal sheets, if necessary) (Be specific)				
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provisions fo	nent provides for an expression from the ac-	nendment if not c				
(if not ap	oplicable, indicate N A)					
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		-				

The date of each amendment(s) adoption: date this document was signed. May 1, 2017 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 not be listed as the document's effective date on the Department of State's records.
Adoption of Amendment(s) (CHECK ONE)
■ The amendment(s) was/were adopted by the shareholders. The number of votes east 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)
☐ 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.
May 1, 2017 Dated
Signature And how he had
(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)
Antonio Garcia, Consulting Services of S. Florida Inc.
(Typed or printed name of person signing)
President
(Title of person signing)