## P08000091976

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## 

**TO:** Amendment Section Division of Corporations

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NAME OF CORPOR	ATION: FLORIDACAPS C	CORPORATION	
DOCUMENT NUMB	P08000091976		
The enclosed Articles	of Amendment and fee are sul	bmitted for filing.	
Please return all corres	pondence concerning this mat	tter to the following:	
	ANGEL F MENDOZA		
•		Name of Contact Person	1
	FLORIDACAPS CORPORA	ATION	
		Firm/ Company	
	1271 JOHNSON CT		
•	<u> </u>	Address	
	HOLLYWOOD FL 33019		
•		City/ State and Zip Cod	e
argan	nb79@yahoo.com		
	<del>-</del> -	ed for future annual report	notification)
		va in man vanian report	,
For further information	concerning this matter, pleas	se call:	
ANGEL F MENDOZ	Α	at (	4580809
Name o	f Contact Person	Area Co	de & Daytime Telephone Number
Enclosed is a check for	the following amount made p	payable to the Florida Dep	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)
Ame Divi P.O.	ing Address ndment Section sion of Corporations Box 6327 thassee, FL 32314	Ameno Divisio The C 2415 t	Address Iment Section on of Corporations entre of Taflahassee N. Monroe Street, Suite 810 assee, F1, 32303

## Articles of Amendment to Articles of Incorporation of

## FLORIDACAPS CORPORATION

(Name of Corporation as curre	ntly filed with the Florida Dept. of State)	
P08000091976		
(Document Number	r of Corporation (if known)	
Pursuant to the provisions of section 607.1006, Florida Statutes, thits Articles of Incorporation:	nis Florida Profit Corporation adopts the following amendment	(s) to
A. If amending name, enter the new name of the corporation:		
N/A	The new	
name must be distinguishable and contain the word "corporation," "Inc.," or Co.," or the designation "Corp," "Inc.," or "Co", "chartered," "professional association," or the abbreviation "P.,	"company," or "incorporated" or the abbreviation "Corp.,"  A professional corporation name must contain the word	
B. Enter new principal office address, if applicable:	N/A	
(Principal office address <u>MUST BE A STREET ADDRESS</u> )	. 20	
	9	
	<u></u>	\$ :\frac{1}{2}
C. Enter new mailing address, if applicable:	N/A	•
(Mailing address MAY BE A POST OFFICE BOX)	. <del>''</del> O	2 E
	<del></del>	
	0	
D. If amending the registered agent and/or registered office ad	ddress in Florida, enter the name of the	
new registered agent and/or the new registered office addre		
N/A Name of New Registered Agent		
(Florida	street address)	
New Registered Office Address:	. Florida	
	(City) (Zip Code)	
New Registered Agent's Signature, if changing Registered Age		
Thereby accept the appointment as registered agent. Tam familia	ent: or with and accept the obligations of the position	
Signature of New	v 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-Doe	
X Remove	$\underline{V}$	Mike Jones	
X Add	<u>SV</u>	Sally Smith	
Type of Action (Check One)	Title	<u>Name</u>	<u>Addres</u> s
1) Change	N/A	N/A	<u> </u>
Add			
Remove			
2) Change			
Add			
Remove 3) Change			
Add			
Remove			
4) Change			
Add			
Remove			
5) Change		_	
Add			
Remove			
6) Change			
Add			
Remove			
		Page 2 of 4	
E. If amending or additional she	ng additi zets, if ne	ional Articles, enter change(s) here: cessary). (Be specific)	

<del></del>	
	<del></del>
	<del></del>
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 N/A)  MY WIFE MARIA DE LOS ANGELES MENDOZA IS TRANSFERING TO ME 375 SHARES OF HER COMM	ION
STOCK. WITH THIS TRANSFER I OWN 50% OF THE COMPANY.	<del></del>
	<del></del>
Page 3 of 4	
The date of each amendment(s) adoption:	other than the
DECEMBER 23, 2019	,
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)	( <u>CHECK ONE</u> )
■ The amendment(s) was/were ac by the shareholders was/were s	dopted by the shareholders. The number of votes east for the amendment(s) sufficient for approval.
	oproved by the shareholders through voting groups. The following statement or each voting group entitled to vote separately on the amendment(s):
"The number of votes cas	a for the amendment(s) was/were sufficient for approval
by	
	(voting group)
☐ The amendment(s) was/were action was not required.	lopted by the hoard of directors without shareholder action and shareholder
☐ The amendment(s) was/were action was not required.	lopted by the incorporators without shareholder action and shareholder
Dated DECEM	MBER 23, 2019
	( MB
select	director, president or other officer – if directors or officers have not been ed, by an incorporator – if in the hands of a receiver, trustee, or other court nted fiduciary by that fiduciary)
	ANGEL F MENDOZA
	(Typed or printed name of person signing)
	PRESIDENT
	(Title of person signing)