## P09000032506

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## COVER LETTER.

TO: Amendment Section

Division of Corporations

Tallahassee, FL 32314

NAME OF CORPORATION: Altura MT. Corp. DOCUMENT NUMBER: P09000032506 The enclosed Articles of Amendment and fee are submitted for filing. Please return all correspondence concerning this matter to the following: Ernesto Salas Name of Contact Person Altura MT. Corp. Firm/ Company 23163 Sunfield Drive Address Boca Raton, Fl. 33433 City/ State and Zip Code ernesto@salastech.com E-mail address: (to be used for future annual report notification) For further information concerning this matter, please call: at ( 561 ) 8836336 Area Code & Daytime Telephone Number Ernesto Salas Name of Contact Person Enclosed is a check for the following amount made payable to the Florida Department of State: □\$43.75 Filing Fee & **\$35** Filing Fee ☐\$43.75 Filing Fee & □\$52.50 Filing Fee Certificate of Status Certified Copy Certificate of Status (Additional copy is Certified Copy enclosed) (Additional Copy is enclosed) **Mailing Address** Street Address Amendment Section Amendment Section Division of Corporations Division of Corporations The Centre of Tallahassee P.O. Box 6327

2415 N. Monroe Street, Suite 810

Tallahassee, FL 32303

## Articles of Amendment to Articles of Incorporation of

	ALTURA M.T. CORP.	2070 ("   13   P# 12: 3)
(Name of Cor	poration as currently filed with the Florida De	pt. of State)
	P09000032506	
(	Document Number of Corporation (if known)	
Pursuant to the provisions of section 607,1006, its Articles of Incorporation:	Florida Statutes, this Florida Profit Corporation	adopts the following amendment(s) to
A. If amending name, enter the new name of	f the corporation:	
		The _new
name must be distinguishable and contain the wall in the wall in the wall in the master of the designation "Corp," "chartered," "professional association," or the	ord "corporation," "company," or "incorporated "Inc," or "Co". A professional corporation eabbreviation "P.A."	t" or the abbreviation "Corp.," name must contain the word
B. Enter new principal office address, if app (Principal office address <u>MUST BE A STREE</u>		
C. Enter new mailing address, if applicable (Mailing address MAY BE A POST OFFICE)	<u></u>	
D. If amending the registered agent and/or remew registered agent and/or the new registered.	registered office address in Florida, enter the natered office address:	ame of the
Name of New Registered Agent		
	(Florida street address)	
New Registered Office Address:		Florida
	(City)	(Zip Code)
New Registered Agent's Signature, if changi		
I hereby accept the appointment as registered a	gent. I am familiar with and accept the obligation	ons of the position.

Signature of New Registered Agent, if changing

## Check if applicable

☐ The amendment(s) is/are being filed pursuant to s. 607.0120 (11) (e), F.S.

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)

Example:

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>	John Doe	
X Remove	<u>V</u>	Mike Jones	
X Add	<u>sv</u>	Sally Smith	
Type of Action (Check One)	<u>Title</u>	<u>Name</u>	<u>Addres</u> s
1) Change	V	Ernesto Anel Salas	16766 NW 12th street
Add		-	Pemborke Pines, FL 33028
X Remove			
2) Change			
Add			
Remove Change			
Add			
Remove			
4) Change		<del></del>	
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5) Change			
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6) Change			
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amending or adding additional Artitach additional sheets, if necessary).	(Be specific)		
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an amendment provides for an exc rovisions for implementing the ame	nange, reclassification, or cancell adment if not contained in the a	mendment itself:	
(if not applicable, indicate N/A)	minent if not contained in the a	menument asen.	
,			

The date of each amendment(s	adoption:	, if other than the
date this document was signed.	(0/2020)	
Effective date if applicable:	/8/2020	
	(no more than 90 days after amendment file date)	
Note: If the date inserted in thi document's effective date on the	s block does not meet the applicable statutory filing requirements, Department of State's records.	this date will not be listed as the
Adoption of Amendment(s)	( <u>CHECK ONE</u> )	
The amendment(s) was/were action was not required.	adopted by the incorporators, or board of directors without sharehold	er action and shareholder
☐ The amendment(s) was/were by the shareholders was/were	adopted by the shareholders. The number of votes east for the amends sufficient for approval.	dment(s)
	approved by the shareholders through voting groups. The following for each voting group entitled to vote separately on the amendment(s	
"The number of votes c	ast for the amendment(s) was/were sufficient for approval	
bv	."	
-	(voting group)	
7/8/2020 Dated		
77.acu		
Signature		<del></del>
sele	a director, president or other officer – if directors or officers have not cted, by an incorporator – if in the hands of a receiver, trustee, or oth binted fiduciary by that fiduciary)	
	Ernesto Salas	
	(Typed or printed name of person signing)	1. At at
	President	
	(Title of person signing)	