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| uestor's Name) | |
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| iling Officer: | |
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Office Use Only



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MY OF JULY

COVER LETTER

| Division of Corporations | | | | | |
|--|--|--|--|--|--|
| NAME OF CORPORATION: VIDA NUEVA # 1 Corp. DOCUMENT NUMBER: PO 90000 583 78 | | | | | |
| 1.000 - 00 / | | | | | |
| The enclosed Articles of Amendment and fee are submitted for filing. | | | | | |
| Please return all correspondence concerning this matter to the following: | | | | | |
| Ileana Paez | | | | | |
| Name of Contact Person | | | | | |
| VIDA NUEVA #1 | | | | | |
| Firm/ Company | | | | | |
| 745 NW 102 St. | | | | | |
| 745 NW 102 St. MINNI, FL 93 150 | | | | | |
| City/ State and Zip Code | | | | | |
| ICSANCHEZ 33014@MSN.COM | | | | | |
| E-mail address: (to be used for future annual report notification) | | | | | |
| For further information concerning this matter, please call: 109 ma Paer 312 - 4259 | | | | | |
| Name of Contact Person Area Code & Daytime Telephone Number | | | | | |
| Name of Comact I cison Area Code & Daytime Telephone Number | | | | | |
| Enclosed is a check for the following amount made payable to the Florida Department of State: | | | | | |
| | | | | | |
| \$35 Filing Fee & \$\sum \\$3.75 Filing Fee & \$\sum \\$43.75 Filing Fee & \$\sum \\$52.50 Filing Fee Certificate of Status Certified Copy Certificate of Status | | | | | |
| (Additional copy is Certified Copy | | | | | |
| enclosed) (Additional Copy | | | | | |

TO: Amendment Section

Mailing Address
Amendment Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314

Street Address

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

is enclosed)

| • | Articles of Amendment | | ^{سنا} پين |
|---|---|------------------------------|--------------------|
| | to | | |
| / . | Articles of Incorporation of | G | 1 |
| Vida | NUEVA #1 | CORP. | 7 |
| (Name of Cor | poration as currently filed with the | Florida Dept. of State) | |
| Pl | 290000 5837 | 8 | 3 |
| | (Document Number of Corporation (if | known) | |
| rsuant to the provisions of section 607.1006, Articles of Incorporation: | Florida Statutes, this Florida Profit C | orporation adopts the follo | owing amendmen |
| If amending name, enter the new name o | f the corporation: | | |
| | | | The new |
| ne must be distinguishable and contain t orp.," "Inc.," or Co.," or the designation rd "chartered," "professional association," | "Corp," "Inc," or "Co". A profess | | |
| Enter new principal office address, if appincipal office address MUST BE A STREE | | | |
| Enter new mailing address, if applicable (Mailing address MAY BE A POST OFFI | | | |
| | | | |
| If amending the registered agent and/or new registered agent and/or the new regi | | enter the name of the | |
| | · · · | | |
| Name of New Registered Agent | | | |
| | (Florida street address) | | |
| New Registered Office Address: | | , Florida | |
| New Registered Office Address. | (City) | , riorida | (Zip Code) |
| | | | |
| w Registered Agent's Signature, if changi | ng Registered Agent: | | |
| ereby accept the appointment as registered o | igent. I am familiar with and accept t | he obligations of the positi | ion. |
| | | | |
| | | | |
| | | | |

Signature of New 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 D | toe | | | |
|-------------------------------|--------------|-------------|---------------|-------------------------------------|--|--|
| X Remove | <u>v</u> | Mike Jones | | | | |
| X Add | <u>sv</u> | Sally Smith | | | | |
| Type of Action (Check One) | <u>Title</u> | | Name | <u>Addres</u> s | | |
| 1) Change | VP | _ | Jean Gonzalez | 745 N.W. 102 St. MIMMI, FL 33150 | | |
| Add | | | | MIMII, FL 33150 | | |
| Remove | | | | | | |
| 2) Change | | _ | | | | |
| Add | | | | | | |
| Remove | | | | | | |
| 3) Change | | | | | | |
| Add | | | | | | |
| Remove | | | | | | |
| 4) Change | <u></u> | | | | | |
| Add | | | | | | |
| Remove | | | | | | |
| 5) Change | | | | 73 | | |
| Add | | | | | | |
| Remove | | | | | | |
| 6) Change | | _ | | | | |
| Add | | | | | | |
| Remove | | | | | | |

| E. If amending or adding additional Artic | cles, enter change(s) here: |
|---|--|
| (Attach additional sheets, if necessary). | (Be specific) |
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| /1 / / <i>W</i> | |
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| F. If an amendment provides for an excha | ange, reclassification, or cancellation of issued shares, |
| provisions for implementing the amen | dment if not contained in the amendment itself: |
| (if not applicable, indicate N/A) | |
| 1 | |
| 1/1/2 | |
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| W / ' | |
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| The date of each amendment(s) adoption: $04/20/20/7$ | , if other than the |
|--|----------------------|
| date this document was signed. Effective date if applicable: $04/20/20/7$ | |
| (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 document's effective date on the Department of State's records. | not be listed as the |
| Adoption of Amendment(s) (CHECK ONE) | |
| The amendment(s) was/were adopted by the shareholders. The number of votes cast 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. | |
| Dated 04/19/2017 | |
| Foreign Suns | |
| Signature | |
| (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) | |
| Ileana Rever | |
| (Typed or printed name of person signing) | |
| President | |
| (Title of person signing) | |