P10000001229

(Re	equestor's Name)	
(Ad	ldress)	
(Ad	ldress)	
(Ĉit	ty/State/Zip/Phone	e #)
PICK-UP	☐ WAIT	MAIL.
(Bu	ısiness Entity Nar	me)
(Do	ocument Number)	
Certified Copies	_ Certificates	s of Status
Special Instructions to Filing Officer:		

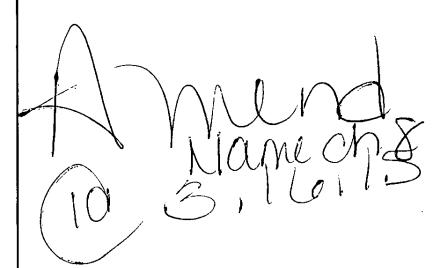




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SECRETARY OF STATEME DIVISION OF GORPORATIONS 2015 MAR 13 PH 12: 43



COVER LETTER

TO: Amendment Section Division of Corporations

	ATION: JEZABEL		P.A.
DOCUMENT NUMB	LK		
The enclosed Articles of	of Amendment and fee are su	bmitted for filing.	
Please return all corres	pondence concerning this mat	tter to the following:	
	JEZABEL P. LI		
	JEZABEL P. LI	Name of Contact Person	1
	201 S. BISCAY	Firm/ Company /NE BLVD. S	UITE 2200
•		Address	
_	<u> MIAMI, FL 331</u>	31	
	·	City/ State and Zip Cod	e
il@	jezabel-llorente	e.com	
<u>, </u>		ed for future annual report	notification)
For further information	concerning this matter, pleas	se call:	
JEZABEL F	P. LIMA	_{at (} 786	, 315-9035
Name o	f Contact Person		de & Daytime Telephone Number
Enclosed is a check for	the following amount made	payable to the Florida Depa	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 Divis	ling Address ndment Section sion of Corporations Box 6327	Ameno Divisio	Address Iment Section on of Corporations Building

Tallahassee, FL 32314

2661 Executive Center Circle Tallahassee, FL 32301

Articles of Amendment Articles of Incorporation



JEZABEL	116	
JEZADEL	LLU	I C. F.A.

JEZABEL LLORENT	E, P.A.		77
	currently filed w	with the Florida Dept. of State)	
P10000001229			
(Documen	t Number of Corp	poration (if known)	
Pursuant to the provisions of section 607. its Articles of Incorporation:	006, Florida Stati	atutes, this Florida Profit Corporation adopts the following amer	ndment(s) to
A. If amending name, enter the new na JEZABEL P. LIMA, P	•	ration:	new
name must be distinguishable and cont "Corp.," "Inc.," or Co.," or the design word "chartered," "professional associat	ation "Corp," "I	corporation," "company," or "incorporated" or the abbrevious inc," or "Co". A professional corporation name must contain reviation "P.A."	ation 1 the
B. Enter new principal office address, i	f applicable:	201 S. BISCAYNE BLVD.	
(Principal office address MUST BE A ST	REET ADDRES	SUITE 2200	
		MIAMI, FL 33131	
C. Enter new mailing address, if applie		201 S. BISCAYNE BLVD.	
		SUITE 2200	
		MIAMI, FL 33131	
D. If amending the registered agent an new registered agent and/or the new		office address in Florida, enter the name of the ce address:	
Name of New Registered Agent	JEZABEL F	P. LIMA	
	201 S. BISC	CAYNE BLVD. SUITE 2200	
		(Florida street address)	
New Registered Office Address:	MIAMI	, Florida 33131	
		(City) (Zip Code)	
New Registered Agent's Signature, if cl I hereby accept the appointment as registe		red Agent: n familiar with and accept the obligations of the position.	

Signatur of New Legistered 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.

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	Р	JEZABEL LLORENTE	201 S. BISCAYNE BLVD.
Add			SUITE 2200
Remove			MIAMI, FL 33131
2) Change	Р	JEZABEL P. LIMA	201 S. BISCAYNE BLVD.
Add			SUITE 2200
Remove			MIAMI, FL 33131
3) Change			
Add			····
Remove			
4) Change			_
Add			
Remove			
5) Change			
Add			
Remove			
6) Change			
Add			
Remove			

E. If amending or adding additional Arti (Attach additional sheets, if necessary).	icles, enter change(s) here:
N/A	(be specyle)
19/74	
•	
-	
F. If an amendment provides for an excl	hange, reclassification, or cancellation of issued shares, endment if not contained in the amendment itself:
(if not applicable, indicate N/A)	andment if not contained in the amendment itself.
N/A	
	and the state of t

The date of each amendment(s date this document was signed.) adoption:	, if other than the
	MARCH 9, 2015	
Effective date <u>if applicable</u> :	(no more than 90 days after amendment file date)	_
Adoption of Amendment(s)	(CHECK ONE)	
The amendment(s) was/were by the shareholders was/were	adopted by the shareholders. The number of votes cast for the amendment(s) sufficient for approval.	
	approved by the shareholders through voting groups. The following statement 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	
by		
	(voting group)	
The amendment(s) was/were action was not required.	adopted by the board of directors without shareholder action and shareholder	
The amendment(s) was/were action was not required.	adopted by the incorporators without shareholder action and shareholder	
Dated MARC	CH 9, 2015	
Signature	DV	
	a director, president or other officer – if directors or officers have not been cted, by an incorporator – if in the hands of a receiver, trustee, or other court	
	ointed fiduciary by that fiduciary)	
	JEZABEL P. LIMA F/K/A JEZABEL LLORENTE	
	(Typed or printed name of person signing)	
	PRESIDENT	
	(Title of person signing)	