## P10000001336

	(Requestor's Name)
	(Address)
	(Address)
•	(City/State/Zip/Phone #)
PICK-U	P WAIT MAIL
	(Business Entity Name)
<u></u>	(Document Number)
Certified Copies	Certificates of Status
Special Instruction	s to Filing Officer:
2	
	-

Office Use Only.



900182615049

07/02/10--01011--021 \*\*35.00

Amens



Probate JUL 0 6 2019

## **COVER LETTER**

TO: Amendment Section
Division of Corporations

NAME OF CORPORATION: COENCOID 1	lotaries service	o Inc.
DOCUMENT NUMBER: P-100000013	554 · · ·	•
The enclosed Articles of Amendment and fee are sub	mitted for filing.	
Please return all correspondence concerning this matt	er to the following:	
Wands Perez		
Name of	Contact Person	
	Services In	C
PHB#ESOU	/ Company	:
1784 N. Congre	Address	<del> </del>
0		
WPB F13	3419	
·	te and Zip Code	
E-mail address: (to be used for to	Hatmail Can  ture annual report notification)	
For further information concerning this matter, please	e call:	
	at (54) <u>628-U</u> Area Code & Daytime Tele	phone Number
Enclosed is a check for the following amount made p	ayable to the Florida Depart	ment of State:
\$35 Filing Fee \$\sum \$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)
Amendment Section	Street Address Amendment Section	1 1 1
	Division of Corporations -	
· · · · · · · · · · · · · · · · · · ·	Clifton Building 2661 Executive Center Circle	, <u>, , , , , , , , , , , , , , , , , , </u>
	Fallahassee, FL 32301	•

## Articles of Amendment to Articles of Incorporation of

(Name of Corporation as	<u>currently fi</u>	iled with the	Florida Dep	t. of Stat	e)	L-2 PM	<: 06
- P-100000013	36		•		L FITTH	SEE	STATE.
(Document	Number of	Corporation	(if known)			, , ,	GRIDA
uant to the provisions of section 607	7 1006 Flor	ida Statutes	this <i>Florida</i>	Profit C	ornoration	adopts th	e follo
ndment(s) to its Articles of Incorporat		rau Biatatos,	1115 1 101 144	,	o.po.a.io.i	unopur in	e ione
f amending name, enter the new na	me of the co	orporation:		••			•
	₹. <del>-</del> ;					The	new
eviation "Corp.," "Inc.," or Co.," o e must contain the word "chartered,"	r ine aesigi "profession	nation Corp nal associatio	on," or the al	breviatio	projession n "P.A."	nai corpoi	anon
Enter new principal office address, i	f applicable	<u>:</u> _		1		<del></del>	
ncipal office address <u>MUST BE A ST</u>	REET ADI	<u>ORESS</u> )	• •	• •	•		. •
		:		(	· · · · · · · · · · · · · · · · · · ·	`	
÷ .		· · . –	•				
	. 1. 1		• ;				
Enter new mailing address, if applications of applications and the second sections of the second sec		<b>)X</b> )	•	- ;		•-	
	•	<del></del>		1			Ē
	· '.	÷ <u>-</u>	- <u></u>	_ : _ :	<del>.</del>		
		· -	<u> </u>	- ;	···		•
famending the registered agent and	d/or registe	red office ad	dress in Flor	ida, en te	r the nam	e of the	
new registered agent and/or the new				- a - 5			
Name of New Posistaved Acoust		•		.:		•	
Name of New Registered Agent:	-	•			<b>-</b> ,	-	
	. <del></del>		· · · · · · · · · · · · · · · · · · ·	1	<b></b>		
New Registered Office Address:		(Florida	street addres	s) = -		•	-
				, 45	, Florida_		
·		(City)			Code)		
	• .		•	•			
The state and Alleria to Classic Action 18 at	anging Res	ristered Age	<u>nt:</u>				
Registered Agent's Signature, if cheby accept the appointment as registe	ared accept	Lam familia	r with and an	cent the	hligations	of the non	ition

## (Attach additional sheets, if necessary). Title Type of Action Name Address Wanda Perez ☐ Add ☐ Remove ☐ Remove E. If amending or adding additional Articles, enter change(s) here: \_ (attach additional sheets, if necessary). (Be specific) Will be the wands 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)

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:

The date of each amendment(s) ad		tion is required)	<u> </u>
Effective date if applicable:	(dusc of duops		•
	more than 90 days after ame	endment file date)	
		•	!
Adoption of Amendment(s)	(CHECK ONE)		
The amendment(s) was/were add by the shareholders was/were su		The number of votes ca	ist for the amendment(s)
The amendment(s) was/were app must be separately provided for			
"The number of votes cast f	or the amendment(s) was/w	ere sufficient for appro	val
bỳ.		"	:
	ng group)	•	;
The amendment(s) was/were add	opted by the board of director	ors without shareholde	raction and shareholder
action was not required.			
The amendment(s) was/were add action was not required.	opted by the incorporators w	rithout shareholder act	ion and shareholder
Dated Co-O	1-2010		- i
	R		:
Signature (By a dir	ector, president or other offi	cer – if directors or of	ficers have not been
selected,	by an incorporator – if in the diduction by that fiduciary	e hands of a receiver,	
ирроппеч	a nadeling by that nadeling	,	•
<u>Ú</u>	Janda Perez		
	(Typed or printed na	ame of person signing	) ;
	President	•	
· · · · · · · · · · · · · · · · · · ·	(Title of person signing	)	