P10000020786

(Re	equestor's Name)	
(Ad	dress)	
(Ad	dress)	
(Cit	ty/State/Zip/Phone	⇒#)
PICK-UP	☐ WAIT	☐ MAIL
(Bu	isiness Entity Nan	ne)
(Do	ocument Number)	-
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SECHETASSEE, FLORIDATE

3 Roberts OCT 1 4 2018

COTENDETTEN

TO: Amendment Section

Division of C	-		-
NAME OF CORI	PORATION:	Marsus Corp.	
DOCUMENT NU	JMBER:	P10000020786	
The enclosed Artic	cles of Amendment and fee a	are submitted for filing.	
Please return all co	orrespondence concerning th	is matter to the following:	
		Moises F. Sobenes	
		Name of Contact Person	
		Marsus Corp. Firm/ Company	
		0 0 5 00 0 T I I II 0 0 0	
	153	6 SE 26 ST Unit 200 Address	
		estead, Florida 33035 City/ State and Zip Code	
		de22@hotmail.com ed for future annual report notification)	
For further inform	ation concerning this matter,	please call:	
	oises F. Sobenes of Contact Person	at (<u>305</u>) <u>2</u> Area Code & Daytime Tel	57-6830 ephone Number
Enclosed is a chec	k for the following amount r	nade payable to the Florida Depar	tment of State:
☑ \$35 Filing Fee	\$43.75 Filing Fee & Certificate of Status	S43.75 Filing Fee & Certified Copy (Additional copy is enclosed)	\$52.50 Filing Fee Certificate of Status Certified Copy (Additional Copy is enclosed
Mailing A		Street Address	
Amendmer		Amendment Section	
	Corporations	Division of Corporations	
P.O. Box 6	327 - FI 30314	Clifton Building 2661 Executive Center Circl	۵
Lananacce	- FI 3/314	ZODI EVECHIVE L'ENIET I 1FC!	E

Tallahassee, FL 32301

ALUCIUS OF AIRCHORDING

to Articles of Incorporation

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'86	State) 10 OCT 12
	TALLAHARA
tatutes, this <i>Florida Pro</i>	fit Corporation adopts the
ration:	
	The n
	y," or "incorporated" or i '". A professional corporati viation "P.A."
1536 SE 26 Stre	eet
<u>(S</u>) Unit 200	. <u></u>
Homestead, Flo	rida 33035
P.O. BOX 34345	3
Homestead, Flor	ida 33034
ffice address in Florida, e address:	enter the name of the
Sobenes	
	, Florida <u>33035</u>
ліу) Л	(Zip Code)
Agent:)
My Joseph L	the obligations of the positio
New Registered Agent, if	
	with the Florida Dept. of 1886 Foration (if known) Itatutes, this Florida Proceedings of the Agent: Page 1886 Foration (if known) Itatutes, this Florida Procedures of the Agent: Page 1886 P.O. BOX 34345 Homestead, Florida, address: Sobenes Plorida street address) Identify and address of the Agent: Page 1886 P.O. BOX 34345

removed at		ach Officer and/or Director being added	
<u>Title</u>	<u>Name</u>	Address	Type of Action
P	Jorge L. Desme	925 NE 34 Avenue APT 102 Homestead, Florida 33033	
			□ Add □ Remove
	ding or adding additional Artic dditional sheets, if necessary).		
		ange, reclassification, or cancellation of	
	ons for implementing the amen not applicable, indicate N/A)	dment if not contained in the amendmen	nt itseii:
N/A			

rac'uare or each amenumen	100) mary man 1010 1120 10 10 -1 - 10
(N ← M	(date of adoption is required)
Effective date <u>if applicable</u> :	(no more than 90 days after amendment file date)
Adoption of Amendment(s)	(<u>CHECK ONE</u>)
• •	ere adopted by the shareholders. The number of votes cast for the amendment(s) vere sufficient for approval.
	ere approved by the shareholders through voting groups. The following statemented for each voting group entitled to vote separately on the amendment(s):
"The number of votes	s cast for the amendment(s) was/were sufficient for approval
by	,"
	(voting group)
action was not required.	ere adopted by the board of directors without shareholder action and shareholder ere adopted by the incorporators without shareholder action and shareholder
Dated 10/0 Signature _	MilloSenlesme
sel	y a director, president or other officer – if directors or officers have not been lected, by an incorporator – if in the hands of a receiver, trustee, or other court pointed fiduciary by that fiduciary)
	Moises F. Sobenes
	(Typed or printed name of person signing)
	President
	(Title of person signing)