P/00000 37348

(Requestor's Name)
(Address)
(Address)
(Address)
(City/State/Zip/Phone #)
PICK-UP WAIT MAIL
(Business Entity Name)
(Caomese Linny Name)
(Document Number)
Certified Copies Certificates of Status
Special Instructions to Filing Officer:

Office Use Only



900331995499

05/01/19--01006--004 **35.00

19 AUG - 1 AM 10: 25
SECRETARY OF STATE

THE OF THE TENER

COVER LETTER

TO: Amendment Section
Division of Corporations

NAME OF CORPORA	TION:	PROBAG INC.	
	R:	P10000037348	
The enclosed Articles of	Amendment and fee are sul	bmitted for filing.	
Please return all correspo	endence concerning this mat	ter to the following:	
		HAYDEE YAIMA TOLM	0
		Name of Contact Person	
		MANAGER	
_		Firm/ Company	•
		9955 NW 88TH AVE.	
_		Address	
_		MEDLEY, FL. 33178	
		City/ State and Zip Code	
		SALES@PROBAG.BIZ	
	E-mail address: (to be us	sed for future annual report	notification)
For further information of	concerning this matter, pleas	se call:	
Name of	Contact Person	at (Area Co) de & Daytime Telephone Number
	he following amount made		
■ \$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)
Amen Divisi P.O. E	ng Address dment Section on of Corporations Box 6327 assee, FL 32314	Amend Divisio Clifton 2661 F	Address Iment Section on of Corporations Building Executive Center Circle assee, FL 32301

Articles of Amendment to Articles of Incorporation of

PROBAG INC.

(Name of Corpora	ation as currently	filed with the Florida Dep	ot. of State)
	P10000037	7348	
(Doc	cument Number of C	Corporation (if known)	
Pursuant to the provisions of section 607.1006. Florests Articles of Incorporation:	rida Statutes, this Fa	lorida Profit Corporation :	adopts the following amendment(s
A. If amending name, enter the new name of the	corporation:		
NOT APPLICABLE			The new
name must be distinguishable and contain the w "Corp.," "Inc.," or Co.," or the designation "Co word "chartered," "professional association," or t	orp," "Inc," or "C	'o''. A professional corpo	porated" or the abbreviation ration name must contain the
B. Enter new principal office address, if applica	ble:	NOT APPLICABLE	
(Principal office address MUST BE A STREET A			
		 .	
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE)	<u>BOX</u>)	NOT APPLICABLE	
			19 SE TAL
			ame of the
D. If amending the registered agent and/or regis	stered office addre	ss in Florida, enter the na	ame of the
new registered agent and/or the new register			
Name of New Registered Agent NOT P	APPLICABLE		
	(Florida stree	et address)	
New Registered Office Address:			, Florida
THE REGIMENCE OF THE SERVICE OF THE		City)	(Zip Code)
New Registered Agent's Signature, if changing I	Registered Agent:	iah aad aansa da shlaati	ane of the position
I hereby accept the appointment as registered agen	u. Tam jamurar w	ип ана ассері іне обидан	энх ој те розитон.
	Signature of New Re	egistered Agent, if changing	K

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 = Chie, 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 Doe	
X Remove	<u> </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	D	IVAN EVANOFF	9955 NW 88TH AVE.
Add			MEDLEY, FL. 33178
X Remove			·····
2) Change	D	IGNACIO L RIVERO	9955 NW 88TH AVE.
X Add			MEDLEY, FL. 33178
Remove			
3) Change			
Add			
Remove			35 - F
4) Change			
Add			0: 25 ORIO
Remove			<u> </u>
5) Change			
Add			
Remove			
6) Change			
Add			
Remove			

E. If amending or adding additional Articles, enter change(s) here: (Attach additional sheets, if necessary). (Be specific)			
NOT APPLICABLE			
			
	<u> </u>		
			
		• •	
	<u>≥</u>	19	
	ALI AH	AUG	
F. If an amendment provides for an exchange, reclassification, or cancellation of issued shares,	HASSI	<u> </u>	
provisions for implementing the amendment if not contained in the amendment itself:	· · · · · · · · · · · · · · · · · · ·	÷	
(if not applicable, indicate N/A)		*	
NOT APPLICABLE		Ö	U
	RID	(O)	
			_

The date of each amendment(s) adoption:	, if other the
date this document was signed. 07/25/2019 Effective date if applicable:	
(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. document's effective date on the Department of State's records.	this date will not be listed
Adoption of Amendment(s) (CHECK ONE)	
The amendment(s) was/were adopted by the shareholders. The number of votes cast for the amen by the shareholders was/were sufficient for approval.	dment(s)
☐ The amendment(s) was/were approved by the shareholders through voting groups. The following must be separately provided for each voting group entitled to vote separately on the amendment(statement (s):
"The number of votes cast for the amendment(s) was/were sufficient for approval	
by·"	\$ 10 m
(voting group)	(1) St. 16
☐ The amendment(s) was/were adopted by the board of directors without shareholder action and sha action was not required.	older June
☐ The amendment(s) was/were adopted by the incorporators without shareholder action and shareholder action was not required.	older
Dated	Ť
Signature (By a director, president or other officer = if directors or officers have no	ot been
selected, by an incorporator – if in the hands of a receiver, trustee, or other	ner court
appointed fiduciary by that fiduciary)	
HAYDEE YAIMA TOLMO	
(Typed or printed name of person signing)	
MANAGER	
(Title of person signing)	