

P10000053384

JELAN ACCOUNTING SERVICES, INC.  
4851 NW 79 Avenue, Suite 5  
Doral, Florida 33166

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP ☐ WAIT ☐ MAIL

(Business Entity Name)

(Document Number)

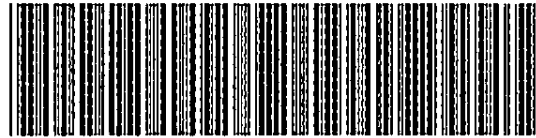
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9/17

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NIC & Amend

W21 - 130602

10/20/21--01005--010 \*\*35.00

2021 OCT 21 AM 9:56  
CLERK OF STATE  
J. W. RAMSEY, JR.

FILED

OCT 21 2021  
A RAMSEY

\*00789, 00524, 00672



FLORIDA DEPARTMENT OF STATE  
Division of Corporations

September 30, 2021

JELEN ACCOUNTING SERVICES INC  
4851 NW 79 AVENUE  
SUITE 5  
DORAL, FL 33166 US

SUBJECT: SICSA CORPORATION  
Ref. Number: P10000053384

We have received your document for SICSA CORPORATION and your check(s) totaling \$1200.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

The reinstatement and name change must be filed together. Please send an additional check for \$35.00 when you resubmit your documents. We are not able to file the efile and also the reinstatement separately (in paper form).

If you have any questions concerning the filing of your document, please call (850) 245-6823.

Annette Ramsey  
OPS

Letter Number: 021A00023635

Articles of Amendment  
to  
Articles of Incorporation  
of

FILED  
2021 OCT 21 AM 9:56  
CLERK OF STATE  
TALLAHASSEE, FL 32399

SICSA CORPORATION

(Name of Corporation as currently filed with the Florida Dept. of State)

010000053384

(Document Number of Corporation (if known))

Pursuant to the provisions of section 607.1006, Florida Statutes, this *Florida Profit Corporation* adopts the following amendment(s) to its Articles of Incorporation:

**1. If amending name, enter the new name of the corporation:**

SICSA USA CORPORATION

*The new name must be distinguishable and contain the word "corporation," "company," or "incorporated" or the abbreviation "Corp.," "Inc.," or "Co.," or the designation "Corp.," "Inc.," or "Co." A professional corporation name must contain the word "chartered," "professional association," or the abbreviation "P.A."*

**2. Enter new principal office address, if applicable:**

*Principal office address MUST BE A STREET ADDRESS*

4851 NW 79TH AVENUE

SUITE 5

DORAL, FL 33166

**3. Enter new mailing address, if applicable:**

*(Mailing address MAY BE A POST OFFICE BOX)*

4851 NW 79TH AVENUE

SUITE 5

DORAL, FL 33166

**4. If amending the registered agent and/or registered office address in Florida, enter the name of the new registered agent and/or the new registered office address:**

*Name of New Registered Agent*

4851 NW 79TH AVENUE SUITE 5

*(Florida street address)*

*New Registered Office Address:* DORAL, Florida 33166

*(City)*

*(Zip Code)*

**New Registered Agent's Signature, if changing Registered Agent:**

*I hereby accept the appointment as registered agent. I am familiar with and accept the obligations of the position.*

*Signature of New Registered Agent, if changing*

**Check if applicable**

☐ The amendment(s) is/are being filed pursuant to s. 607.0120 (11) (c), F.S.

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:

<input checked="" type="checkbox"/> Change	<u>PT</u>	<u>John Doe</u>
<input type="checkbox"/> Remove	<u>V</u>	<u>Mike Jones</u>
<input type="checkbox"/> Add	<u>SV</u>	<u>Sally Smith</u>

Type of Action (Check One)	Title	Name	Address
<input checked="" type="checkbox"/> Change	<u>DPTS</u>	<u>POLANCO, ARTURO</u>	<u>4851 NW 79TH AVE</u>
<input type="checkbox"/> Add			<u>SUITE 5</u>
<input type="checkbox"/> Remove			<u>DORAL, FL 33166</u>
<input checked="" type="checkbox"/> Change	<u>VP</u>	<u>MIGUEL PINA, HELY</u>	<u>4851 NW 79TH AVE</u>
<input type="checkbox"/> Add			<u>SUITE 5</u>
<input type="checkbox"/> Remove			<u>DORAL, FL 33166</u>
<input checked="" type="checkbox"/> Change	<u>VP</u>	<u>VELASQUEZ SALAZAR, JOSE</u>	<u>4851 NW 79TH AVE</u>
<input type="checkbox"/> Add			<u>SUITE 5</u>
<input type="checkbox"/> Remove			<u>DORAL, FL 33166</u>
<input type="checkbox"/> Change	<u></u>	<u></u>	<u></u>
<input type="checkbox"/> Add			<u></u>
<input type="checkbox"/> Remove			<u></u>
<input type="checkbox"/> Change	<u></u>	<u></u>	<u></u>
<input type="checkbox"/> Add			<u></u>
<input type="checkbox"/> Remove			<u></u>
<input type="checkbox"/> Change	<u></u>	<u></u>	<u></u>
<input type="checkbox"/> Add			<u></u>
<input type="checkbox"/> Remove			<u></u>

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The date of each amendment(s) adoption: \_\_\_\_\_, if other than the date this document was signed.

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, this date will not be listed as the document's effective date on the Department of State's records.

Adoption of Amendment(s) (CHECK ONE)

☐ The amendment(s) was/were adopted by the incorporators, or board of directors without shareholder action and shareholder action was not required.

☒ 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)

Dated

9-9-21

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)

ARTURO POLANCO

\_\_\_\_\_  
(Typed or printed name of person signing)

DPTS

\_\_\_\_\_  
(Title of person signing)

RECEIVED

21 SEP 15 PM 2:55



September 8, 2021

FLORIDA DEPARTMENT OF STATE  
Division of CorporationsSICSA CORPORATION  
8181 NW 36 STREET  
13AB  
DORAL, FL 33166SUBJECT: SICSA CORPORATION  
REF: P10000053384

We received your electronically transmitted document. However, the document has not been filed. Please make the following corrections and refax the complete document, including the electronic filing cover sheet.

The above listed entity was administratively dissolved, or its certificate of authority was revoked, for failure to file its 2018 annual report in a timely manner. To reinstate the entity, you must file the reinstatement, and pay the appropriate fees, online at our [www.sunbiz.org](http://www.sunbiz.org). Please select 'Reinstatement' under the 'Filing Services' menu and then click on the 'File Reinstatement' button and follow the prompts. You will have the option to pay by credit/debit card; or by check or money order.

If you have any questions concerning the filing of your document, please call (850) 245-6051.

Stacy Prather  
Regulatory Specialist IIIFAX Aud. #: H21000331851  
Letter Number: 821A00021598

P.O. BOX 6327 - Tallahassee, Florida 32314