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COVER LETTER

TO: Amendment Section

Division of Corporations

NAME OF CORPORATION: JAGUA 1	NC.			
DOCUMENT NUMBER: P10000 G				
The enclosed Articles of Amendment and fee are sub-				
Please return all correspondence concerning this matter	er to the following:			
DAUD OSOR	Name of Contact Person			
JAGUA INC 8510 NW	. Firm/ Company			
8510 NW	7++ ST Address			
PEMBROKE PINES, FL 33074 City/State and Zip Code				
Jagua 826 CMAIL, COM E-mail address: (to be used for future annual report notification)				
For further information concerning this matter, please call:				
DALIO OSOLIO Name of Contact Person	at (<u>501</u>) <u>370 - 5259</u> Area Code & Daytime Telephone Number			
Enclosed is a check for the following amount made pa	·			
	□\$43.75 Filing Fee & □\$52.50 Filing Fee Certified Copy (Additional copy is enclosed) □\$52.50 Filing Fee Certificate of Status Certified Copy (Additional Copy is enclosed)			
Mailing Address Amendment Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314	Street Address Amendment Section Division of Corporations Clifton Building 2661 Executive Center Circle Tallahassee, FL 32301			

Articles of Amendment to Articles of Incorporation of

JAGUA INC.	at Gladaria de Clarida Dana (Cara)
	tly filed with the Florida Dept. of State)
P10000066369 (Document Number of Page 1997)	of Corporation (if known)
Pursuant to the provisions of section 607.1006, Florida Statutes, this its Articles of Incorporation:	
A. If amending name, enter the new name of the corporation:	
	The new
name must be distinguishable and contain the word "corporati "Corp.," "Inc.," or Co.," or the designation "Corp," "Inc," or word "chartered," "professional association," or the abbreviation	"Co". A professional corporation name must contain the
B. Enter new principal office address, if applicable: (Principal office address <u>MUST BE A STREET ADDRESS</u>)	
C. Enter new mailing address, if applicable:	
(Mailing address <u>MAY BE A POST OFFICE BOX</u>)	
	<u> </u>
D. If amending the registered agent and/or registered office address new registered agent and/or the new registered office address	
Name of New Registered Agent	
(Florida si	treet address)
New Registered Office Address:	, Florida
	(City) (Zip Code)
New Designation of Agentia Signature if shareing Designation Agent	
New Registered Agent's Signature, if changing Registered Agen I hereby accept the appointment as registered agent. I am familiar	uth and accept the obligations of the position.
Signature of New	Registered 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.

Example: X.Change	<u>PT</u>	John Doc	
X Remove	$\underline{\mathbf{V}}$	Mike Jones	
X Add	<u>sv</u>	Sally Smith	
Type of Action (Check One)	Title	<u>Name</u>	Address
I)Change	\checkmark	JOEL A. LOVEZ	750H10 RD.
Add Remove			193467
2) Change			
Add			
Remove			
3) Change			····
Add			
Remove			
4) Change			
Add			
Remove			
5) Change			
Add			
Remove			
6) Change			
Add			
Remove			

	(Be specific)	:
		
**		cancellation of issued shares.
If an amendment provides for an exch provisions for implementing the amen (if not applicable, indicate N/A)		
provisious for implementing the amer (if not applicable, indicate N/A)	ndment if not contained in	the amendment itself:
provisious for implementing the amera (if not applicable, indicate N/A) NESIDENT DAMO C	ndment if not contained in	the amendment itself: [00% OF SHALES OF
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provisious for implementing the amen (if not applicable, indicate N/A)	ndment if not contained in	the amendment itself: [00% OF SHALES OF

The date of each amendment(s) adoption:	, if other than the
date this document was signed.	
Effective date if applicable: 7/8/14 (no more than 90 days after amendment file date)	
(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 dedocument's effective date on the Department of State's records.	ate will not be listed as the
Adoption of Amendment(s) (CHECK ONE)	
☐ The amendment(s) was/were adopted by the shareholders. The number of votes cast for the amendment(by the shareholders was/were sufficient for approval.	s)
☐ The amendment(s) was/were approved by the shareholders through voting groups. The following statem must be separately provided for each voting group entitled to vote separately on the amendment(s):	ent
"The number of votes cast for the amendment(s) was/were sufficient for approval	
by	
(voting group)	
The amendment(s) was/were adopted by the board of directors without shareholder action and sharehold action was not required.	er
The amendment(s) was/were adopted by the incorporators without shareholder action and shareholder action was not required.	
Dated 7/8/16	
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 cou	
appointed fiduciary by that fiduciary)	
DARIO OSORIO	
(Typed or printed name of person signing)	
PRESIDENT	
(Title of person signing)	