P1000018563

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PICK-UP WAIT MAIL
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MAY 3 0 2018 S. YOUNG 8 XX 29 PH 4: 38

COVER LETTER

TO: Amendment Section Division of Corporations

NAME OF CORPORATION:	LIIPS RE CORP
DOCUMENT NUMBER: P1000007856	
The enclosed Articles of Amendment and f	ee are submitted for filing.
Please return all correspondence concerning	g this matter to the following:
	SANTE VINCENZI
	Name of Contact Person
	LIIPS RE CORP
	Firm/ Company
	13499 BISCAYNE BLVD STETS-I
	Address
	NORTH MIAMI, FL 33181-2043
	City/ State and Zip Code
	thebusinessassistance@gmail.com
E-mail address:	(to be used for future annual report notification)
For further information concerning this mat	ter, please call:
SANTE VINCENZI	at () 342-1242 Area Code & Daytime Telephone Number
Name of Contact Person	Area Code & Daytime Telephone Number
Enclosed is a check for the following amou	nt made payable to the Florida Department of State:
■ \$35 Filing Fee □\$43.75 Filing Certificate of	
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

LIIPS RE CORP

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

P10000078563

(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:

name must be distinguishable and con. "Corp.," "Inc.," or Co.," or the design word "chartered," "professional associa	vation "Corp," "Inc," or	"Co". A professional corpe		the abbr		m
B. Enter new principal office address,	if applicable:	13499 BISCAYNE BLV	/D STE TS-1			
(Principal office address <u>MUST BE A STREET ADDRESS</u>)		NORTH MIAMI, FL 33	181			
C. Enter new mailing address, if appli (Mailing address <u>MAY BE A POST</u>)		13499 BISCAYNE BLA	•			
				<u> </u>	1 8	
D. If amending the registered agent an new registered agent and/or the new		<u>s:</u>	ame of the	AilAssu	KW 29	
Name of New Registered Agent	13499 BISCAYNE BLVI	O STE TS-1			:: :::	-
New Registered Office Address:	(Florida sti NORTH MIAMI	reet address)	, Florida	3 918 1	#. က က	
		(City)		(Zip Cod	<i>e)</i>	

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

A. If amending name, enter the new name of the corporation:

Thereby accept the appointment as registered agent. Tum familiar with 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 Doe	
X Remove	<u>\\ \\ \\ \\ \\ \\ \\ \\ \\ \\ \\ \\ \\ </u>	Mike Jones	
X Add	<u>SV</u>	Sally Smith	
Type of Action (Check One)	Title	<u>Name</u>	<u>Addres</u> s
1) Change			
Add			
Remove			
2) Change			
Add			
Remove			
3) Change			
Add			
Remove			
4) Change	*****		
Add			
Remove			
51 Change			
Add			
Remove			
6) Change			
Add			
Remove			

f amending or addi Attach <i>additional sh</i>	ets, if necessary).	(Be specific)				
10 2						
	-7.5					
- <u></u>						
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-		<u> </u>				
lf an amendment pr	ovides for an exc	hange, reclassit	fication, or can	cella <u>tion of issu</u> c	ed shares.	
provisions for impl	ementing the ame	endment if not	contained in th	<u>e amendment its</u>	self:	
(ij noi appacai	le, indicate N/A)					
·						
·					-	
						

date this document was signed.	
Effective date <u>if applicable</u> :	
	(no more than 90 days after amendment file date)
Note: If the date inserted in this bedocument's effective date on the De	lock does not meet the applicable statutory filing requirements, this date will not be listed as partment of State's records.
Adoption of Amendment(s)	(<u>CHECK ONE</u>)
The amendment(s) was/were add by the shareholders was/were su	pted by the shareholders. The number of votes east for the amendment(s) fficient for approval.
	roved by the shareholders through voting groups. The following statement each voting group entitled to vote separately on the amendment(s):
	for the amendment(s) was/were sufficient for approval
by	(voting group)
	(voting group)
☐ The amendment(s) was/were add action was not required.	pted by the board of directors without shareholder action and shareholder
☐ The amendment(s) was/were add action was not required.	pted by the incorporators without shareholder action and shareholder
MAY 21 Dated	h. 2018
tBy a d selecte	rector, president or other officer – if directors or officers have not been h, by an incorporator – if in the hands of a receiver, trustee, or other court ed fiduciary by that fiduciary)
	CARLO GIUSTI
	(Typed or printed name of person signing)
	PRESIDENT
	(Title of person signing)