## P11000022502

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FILED
SECRETARY OF STATE
OF CORPORATIONS

J DENNIS
DEC 13 2022

## **COVER LETTER**

TO: Amendment Section

Division of Corp	oorations	e.	•	
NAME OF CORPO	RATION: HONDARES INV	ESTMENTS, INC.		
	BER: P11000022502			
The enclosed Articles	of Amendment and fee are su	bmitted for filing.		
Please return all corre	spondence concerning this ma	tter to the following:		
	ZOILA R. ROSALES			
		Name of Contact Person	1	
	HONDARES INVESTMENT	TS, INC.		
		Firm/ Company		
	6830 INDIAN CREEK DRIV	VE, APT. 3F		
		Address	· · · · · · · · · · · · · · · · · · ·	
	MIAMI BEACH, FL 33141			
	- <del></del>	City/ State and Zip Code	2	
	zoila0810@yahoo.com			
	E-mail address: (to be us	sed for future annual report	notification)	
For further information	on concerning this matter, plea-	se call:		
ZOILA R. ROSALE	S	at (	, 864-2072	
Name	of Contact Person	Area Coo	de & Daytime Telephone Number	
Enclosed is a check for	or the following amount made	payable to the Florida Depa	artment of State:	
\$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)	
Ma	iling Address	Street .	Address	
Am	endment Section		ment Section	
Division of Corporations		Division of Corporations		
P.O. Box 6327			The Centre of Tallahassee	
Tallahassee, FL 32314		2415 N. Monroe Street, Suite 810		

Tallahassee, FL 32303

## Articles of Amendment to Articles of Incorporation of

HC	ND	ARES	INV	ESTM	ENTS.	INC.

(Name	of Corporation as curren	(ly filed with the Florida Dept. of State)	
P11000022502			
	(Document Number	of Corporation (if known)	
Pursuant to the provisions of section 607 its Articles of Incorporation:	.1006, Florida Statutes, this	s Florida Profit Corporation adopts the following amendment(s) to	
A. If amending name, enter the new n	ame of the corporation:	The new	
name must be distinguishable and contain "Inc.," or Co.," or the designation "Control association,	Corp," "Inc," or "Co".	"company," or "incorporated" or the abbreviation "Corp.," A professional corporation name must contain the word	
B. Enter new principal office address, if applicable:		6830 INDIAN CREEK DRIVE, APT. 3F	
(Principal office address MUST BE A S		MIAMI BEACH, FL 33141	
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)		6830 INDIAN CREEK DR. APT. 3F	
· · · · · · · · · · · · · · · · · · ·		MIAMI BEACH, FL 33141	
D. If amending the registered agent an new registered agent and/or the ne			
Name of New Registered Agent	ZOILA R. ROSALES		
	6830 INDIAN CREEK D	RIVE, APT. 3F	
	(Florida s	reet address)	
New Registered Office Address:	MIAMI BEACH	, Florida 33141	
		(City) (Zip Code)	
New Registered Agent's Signature, if c I hereby accept the appointment as regis		t: with and accept the obligations of the position.	
<del>,                                    </del>	eikl low	26	
<del></del>	Signature of New I	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: X Change	<u>PT</u>	John Doc	
X Remove	<u>V</u>	Mike Jones	
_X Add	<u>sv</u>	Sally Smith	
Type of Action (Check One)	Title	<u>Name</u>	<u>∆ddres</u> s
1) Change	Р	AGUSTIN A. HONDARES	2208 SW 8TH STREET
Add			MIAMI, FL 33135
X Remove			
2) X Change	PTS	ZOILA R. ROSALES	6830 INDIAN CREEK DR. APT 3F
Add			MIAMI BEACH, FL 33141
Remove 3.) Change			
Add			
Remove			
4) Change	<del></del>	_	
Add			
Remove			
5) Change			
Add			
Remove			<del>111-7</del>
δ) Change		_	
Add			
Remove			

(Attach additional sheets, if necessar	Articles, enter change(s) here: ry). (Be specific)	
N/A		
		_
F. If an amendment provides for an e	exchange, reclassification, or cancellation of issued shares,	
provisions for implementing the a	amendment if not contained in the amendment itself:	
(if not applicable, indicate N/A	1)	
N/A		
		_

	AUGUST 28, 2022	
The date of each amendment(s) acdate this document was signed.	loption:	, if other than the
Effective date if applicable:		
	tno more than 90 days after amendment file da	ne)
Note: If the date inserted in this bl document's effective date on the De	lock does not meet the applicable statutory filing requirem partment of State's records.	ents, this date will not be listed as th
Adoption of Amendment(s)	( <u>CHECK ONE</u> )	
The amendment(s) was/were ado action was not required.	pted by the incorporators, or board of directors without shar	cholder action and shareholder
☐ The amendment(s) was were ado by the shareholders was were su	pted by the shareholders. The number of votes cast for the afficient for approval.	amendment(s)
	roved by the shareholders through voting groups. The folloeach voting group entitled to vote separately on the amenda	
"The number of votes cast	for the amendment(s) was/were sufficient for approval	
by		
, <u> </u>	(voting group)	
AUGUST 1 Dated	28, 2022	
Signature	rector, president or other officer - it directors or officers ha	va not have
selected	tector, president of other officer = if uncertors of officers in it, by an incorporator = if in the hands of a receiver, trustee, of ed fiduciary by that fiduciary)	
	ZOILA R. ROSALES	
	(Typed or printed name of person signing)	
	PRESIDENT	

(Title of person signing)