P110000 28952

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Fig. 19 Pag. 35

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COVER LETTER

TO: Amendment Section Division of Corporations

NAME OF CORPOR	RATION: 2000 S. BAYSHO	RE #11			
DOCUMENT NUMI					
The enclosed Articles	of Amendment and fee are su	abmitted for filing.			
Please return all corres	spondence concerning this ma	tter to the following:			
	ANGEL D. CORDOVA				
		Name of Contact Person	n		
	ANGEL D. CORDOVA & CO				
		Firm/ Company			
	780 N.W. 42ND AVENUE S	STE 325			
		Address			
	MIAMI, FL 33126				
	-	City/ State and Zip Cod	e		
AR@	ACORDOVA.COM				
	E-mail address: (to be us	sed for future annual report	notification)		
For further information	n concerning this matter, pleas		<u>444-5511</u>		
	of Contact Person	at (305)de & Daytime Telephone Number		
Name	or Contact Person	Aiça Co	de & Daytime reteptione Number		
Enclosed is a check fo	r the following amount made	payable to the Florida Depa	artment of State:		
S35 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)		
Mailing Address Amendment Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314		Amend Divisio Clifton 2661 E	Address Iment Section on of Corporations Building Executive Center Circle		

Articles of Amendment to Articles of Incorporation of

FILED

2000 S. BAYSHORE #11 INC

(Name of Corpor	ration as currently filed with the Florida Dept of State) 3: 35
P11000028952	
(Doc	cument Number of Corporation (if known) ALASSEE, FLOR GA
Pursuant to the provisions of section 607 1006. Flo	orida Statutes, this Florida Profit Corporation adopts the following amer
its Articles of Incorporation:	Trail Statutes, this 2 to rial 2 roys corporation deepts the following after
A. If amending name, enter the new name of the	e corporation:
N/A	The
	word "corporation," "company," or "incorporated" or the abbrevi- orp," "Inc," or "Co". A professional corporation name must contain the abbreviation "P.A."
B. Enter new principal office address, if applica	N/A
(Principal office address MUST BE A STREET A	
C. Entonnous multipe address if annitable.	
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE)	BOX) N/A
<u> </u>	
D. If amending the registered agent and/or regis	stered office address in Florida, enter the name of the
new registered agent and/or the new register	•
Name of New Registered Agent N/A	
	(Florida street address)
New Registered Office Address:	(City), Florida (Zip Code)
	(city)
New Registered Agent's Signature, if changing F	Registered Agent:
	nt. I am familiar with and accept the obligations of the position.
	↓
	Constant Change of the Constant Constan
31	ignature of New Registered Agent, if changing

P = President; V= Vice Executive Officer; CFO held. President, Treasure Changes should be noted a change, Mike Jones led Mike Jones, V as Remove	President = Chief I er, Directo in the foliowers the co	; T= Tree Financial or would l llowing m orporation	anner. Currently John Doe is listed as the n, Sally Smith is named the V and S. These	than one title, list the first letter of PST and Mike Jones is listed as the		
Example: X Change	<u>PT</u>	John Doc				
X Remove	Y	Mike Jones				
X Add	<u>sv</u>	Sally Smith				
Type of Action (Check One)	<u>Title</u>		Name	<u>Addres</u> s		
1) Change	D	_	ALVARADO, PARDI ANNA ISABI	1428 BRICKELL AVENUE		
Add				STE 500		
X Remove				MIAMI, FL 33131		
2) Change	A SEC	_	VIDAL-CORDERO, DAVID	P.O. BOX 330		
Add				CABIN JOHN, MD 20818		
X Remove						
3) Change		_				
Add						
Remove						
4) Change		_				
Add						
Remove						
5) Change		_				
Add						
Remove						
6) Change		_				
Add						
Remove						
			Page 2 of 4			

If amending the Officers and/or Directors, enter the title and name of each officer/director being removed and title,

address of each Officer and/or Director being added:

(Attach additional sheets, if necessary)

(Attach additional sheets, if necessary). (Be specific)	
'A	
	
	<u> </u>
	<u> </u>
	
	<u> </u>
f an amendment provides for an exchange, reclassification, or cancellation of issued shares,	
provisions for implementing the amendment if not contained in the amendment itself:	
(if not applicable indicate MA)	
(if not applicable, indicate N/A)	

The date of each amendment(s) adoption: date this document was signed.	if or
Effective date if applicable: (no more than 90 days after amendment file date)	
(no more than 90 days after amenament fite date)	
Note: If the date inserted in this block does not meet the applicable statutory filing requirements, t document's effective date on the Department of State's records.	his date will not be
Adoption of Amendment(s) (CHECK ONE)	
☐ The amendment(s) was/were adopted by the shareholders. The number of votes cast for the amenda by the shareholders was/were sufficient for approval.	ment(s)
☐ The amendment(s) was/were approved by the shareholders through voting groups. The following so 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	
by" (voting group)	
The amendment(s) was/were adopted by the board of directors without shareholder action and share action was not required.	eholder
☐ The amendment(s) was/were adopted by the incorporators without shareholder action and sharehold action was not required.	ler
Dated 9-16-19	
Signature XXXIIIIIIIIIIIIIIIIIIIIIIIIIIIIIIIIII	
(By a director, president or other officer – if directors or officers have not	
selected, by an incorporator – if in the hands of a receiver, trustee, or othe appointed fiduciary by that fiduciary)	r court
appointed fiduciary by that fiduciary)	
ROXANNA DEGREGORIO	
(Typed or printed name of person signing)	
DIRECTOR	
(Title of person signing)	