## P110000030494

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2022 SEP -6 AM IO: 33 SECKETTAY OF STATE TALLAHASSES, FL

)22 SEP -6 AM 10: (

of 12/10/2072

## **COVER LETTER**

**TO:** Amendment Section Division of Corporations

NAME OF CORPOR	ATION: LGP MIAMI COM	IPANY INC	
DOCUMENT NUMBI	D11000020404		<u>.,                                      </u>
The enclosed Articles o	f Amendment and fee are su	bmitted for filing.	
Please return all corresp	ondence concerning this ma	tter to the following:	
C	Osvaldo Garcia De La Cruz		
•-	-	Name of Contact Person	
1	.GP MIAMI COMPANY IN	C	
_		Firm/ Company	<del></del>
4	721 SW 142nd CT		
_		Address	
Ŋ	Miami, FL 33175		
_		City/ State and Zip Code	;
g	arcia122366@gmail.com		
_	E-mail address: (to be us	sed for future annual report	notification)
For further information	concerning this matter, pleas	se call:	
Lisdelys Garcia		786at (	_) 623-4133
Name of	Contact Person	Area Coo	le & Daytime Telephone Number
Enclosed is a check for	the following amount made	payable to the Florida Depa	artment of State:
S35 Filing Fee	☐\$43.75 Filing Fee & Certificate of Status	S43.75 Filing Fee & Certified Copy (Additional copy is enclosed)	☐\$52.50 Filing Fee Certificate of Status Certified Copy (Additional Copy is enclosed)
Amen Divisi P.O. I	ng Address dment Section on of Corporations Box 6327 nassee, FL 32314	Amend Division The Co 2415 N	Address ment Section n of Corporations entre of Tallahassee I. Monroe Street, Suite 810 ssee, FL 32303

## Articles of Amendment Articles of Incorporation of

Check if applicable

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

FILED

LGP MIAMI COMPANY INC			2022 SEP - 6 AM	
(Name	of Corporation as curren	tly filed with the Florida		
P11000030494			SECRETARY OF S TALLAHASSEE.	TATE
	(Document Number	of Corporation (if known)		rL
Pursuant to the provisions of section 607 its Articles of Incorporation:	.1006, Florida Statutes, this	s Florida Profit Corporatio	on adopts the following amendment	(s) to
A. If amending name, enter the new n	ame of the corporation:			
N/A			The new	
name must he distinguishable and contain "Inc.," or Co.," or the designation "C "chartered," "professional association.	Corp," "Inc," or "Co".	A professional corporation	ted" or the abbreviation "Corp.,"	
B. Enter new principal office address,	if annlicable:	N/A		
(Principal office address <u>MUST BE A S</u>			***	
		<del></del>		
		,		
C. Enter new mailing address, if appl (Mailing address <u>MAY BE A POST</u>		N/A		
D. If amending the registered agent ar			name of the	
new registered agent and/or the ne	-	<u>is:</u>		
Name of New Registered Agent	N/A			
	(Florida s	treet address)		
New Registered Office Address:	N/A		, Florida	
New Registered Office Address.		(City)	(Zip Code)	
New Registered Agent's Signature, if c	hanging Registered Agen	<u>ıt:</u>		
I hereby accept the appointment as regis	tered agent. I am familiar	with and accept the obliga	ttions of the position.	
<del></del>	Signature of New .	Registered Agent, if change	ing	
	Signature of them		0	

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)

Example:

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.

X Change	<u>PT</u>	John Doc		
X Remove	<u>v</u>	Mike Jones	<u>S</u>	
X Add	<u>SV</u>	Sally Smith	<u>h</u>	
Type of Action (Check One)	<u>Title</u>	<u>Na</u>	ame	Address
1) Change	<u>v</u>	Li	isdelys Garcia	9010 SW 137TH AVE. STE. 202
X Add				MIAMI, FL 33186
Remove				
2) Change		_ <b>_</b>		
Add				
Remove 3 ) Change				
Add				
Remove				
4) Change				
Add				
Remove				
5) Change				
Add				
Remove				
6) Change		_		
Add				
Remove				

If amending or adding additional (Attach additional sheets, if necessional sheets), and the control of the cont	eary). (Be specific)	
<b>↑</b>		
	· · · · · · · · · · · · · · · · · · ·	
		<del></del>
	·	
If an amendment provides for a	n exchange, reclassification, or cancellation of issued shares,	
provisions for implementing the	e amendment if not contained in the amendment itself:	
(if not applicable, indicate N	<i>(A</i> )	
A		
<del>-</del>		

•

The date of each amendment(s) ad	September 01, 2022 , if other than
date this document was signed.	prior in once man
Septe	mber 01, 2022
Effective date <u>if applicable</u> :	(no more than 90 days after amendment file date)
Note: If the date inserted in this bl document's effective date on the Dep	ock does not meet the applicable statutory filing requirements, this date will not be listed as partment of State's records.
Adoption of Amendment(s)	(CHECK ONE)
The amendment(s) was/were adoption was not required.	oted by the incorporators, or board of directors without shareholder action and shareholder
☐ The amendment(s) was/were adop by the shareholders was/were suf	oted by the shareholders. The number of votes east for the amendment(s) ficient for approval.
	roved by the shareholders through voting groups. The following statement each voting group entitled to vote separately on the amendment(s):
	or the amendment(s) was/were sufficient for approval
by	(voting group)
selected	ector president or other officer - if directors or officers have not been by an incorporator - if in the hands of a receiver, trustee, or other court of fiduciary by that fiduciary)
-	Osvaldo Sarcia De La Cruz (Typed or printed name of person signing)
-	President (Title of person signing)