PII 000040611

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TO: Amendment Section Division of Corporations

NAME OF CORPOR	ATION: 4601 COLLINS A	VE., CORP.	-			
DOCUMENT NUMB						
The enclosed Articles	of Amendment and fee are sul	bmitted for fili	ng.			
Please return all corres	pondence concerning this ma	tter to the follo	owing:			
	GLAUCE BRASIL					
		Name of Co	ontact Person			
	PGL3 SERVICES LLC					
•		Firm/ (Company			
	15800 PINES BLVD, STE 31	6				
•	Address					
	PEMBROKE PINES, FL 33027					
•	City/ State and Zip Code					
	GLAUCE.BRASIL@PGL3S	ERVICES.CO	M			
•	E-mail address: (to be us	ed for future a	nnual report n	otification)		
For further information	concerning this matter, pleas	se call:				
GLAUCE BRASIL	UCE BRASIL		954	562-9010		
Name of Contact Person			Area Cod	e & Daytime Telephone Number		
Enclosed is a check for	the following amount made p	payable to the	Florida Depar	tment of State:		
■ \$35 Filing Fee	□\$43.75 Filing Fee & Certificate of Status	S43.75 Fi Certified ((Additional enclosed)	Copy I copy is	☐\$52.50 Filing Fee Certificate of Status Certified Copy (Additional Copy is enclosed)		
Ame Divis P.O.	ing Address ndment Section sion of Corporations Box 6327 hassee, FL 32314	Street Address Amendment Section Division of Corporations The Centre of Tallahassee 2415 N. Monroe Street, Suite 810 Tallahassee, FL 32303		nent Section of Corporations ntre of Tallahassee . Monroe Street, Suite 810		

Articles of Amendment to Articles of Incorporation of

100 50,29 Kill 5.5

4601 COLLINS AVE., CORP. (Name of Corporation as currently filed with the Florida Dept. of State) P110000406100 (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: A. If amending name, enter the new name of the corporation: N/A name must be distinguishable and contain the word "corporation," "company," or "incorporated" or the abbreviation "Corp.," "Inc.," or Co.," or the designation "Corp," "Inc," or "Co". A professional corporation name must contain the word "chartered," "professional association," or the abbreviation "P.A." N/A B. Enter new principal office address, if applicable: (Principal office address MUST BE A STREET ADDRESS) C. Enter new mailing address, if applicable: N/A (Mailing address MAY BE A POST OFFICE BOX) D. If amending the registered agent and/or registered office address in Florida, enter the name of the new registered agent and/or the new registered office address: PGL3 SERVICES LLC Name of New Registered Agent 15800 PINES BLVD, STE 316 (Florida street address) Florida 33027 PEMBROKE PINES New Registered Office Address: (City)

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

I hereby accept the appointment as registered agent. I am familiar with and accept the obligations of the position.

Signature of New Registered Agent, if changing

Check if applicable

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

M

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 udditional 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:

A_Change	<u>P1</u>	John Doe	
X Remove	<u>v</u>	Mike Jones	
_X Add	<u>sv</u>	Sally Smith	
Type of Action (Check One)	<u>Title</u>	Name	Address
1)Change		N/A	<u></u>
Add			
Remove			
2)Change		N/A	
Add			
Remove Change		N/A	
Add			
Remove			
4)Change		N/A	
Add			
Remove			
5) Change		N/A	
Add			
Remove			
5) Change		N/A	
Add			
Remove			



	(Be specific)
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<u> </u>	
f an amendment provides for an exch	ange, reclassification, or cancellation of issued shares,
<u>provisions for implementing the amer</u>	ange, reclassification, or cancellation of issued shares, and ment if not contained in the amendment itself:
an amendment provides for an exchorovisions for implementing the amer (if not applicable, indicate N/A)	ange, reclassification, or cancellation of issued shares, adment if not contained in the amendment itself:
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06/24/2020, if other than the
The date of each amendment(s) adoption:, if other than the date this document was signed.
Effective date if applicable:
(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 date will not be listed as the document's effective date on the Department of State's records.
Adoption of Amendment(s) (CHECK ONE)
The amendment(s) was/were adopted by the incorporators, or board of directors without shareholder action and shareholder action was not required.
☐ The amendment(s) was/were adopted by the shareholders. The number of votes cast for the amendment(s) by the shareholders was/were sufficient for approval.
The amendment(s) was/were approved by the shareholders through voting groups. The following statement 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
(voting group)
06/24/2020 Dated
Signature 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 court
appointed fiduciary by that fiduciary)
LILIANE GRESSLER AFONSO
(Typed or printed name of person signing)
DIRECTOR

(Title of person signing)