P11000103574

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(Cit	ty/State/Zip/Phon	e #)
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COVER LETTER

TO: Amendment Section Division of Corporations

NAME OF CORPOR	RATION: DIEGO ROSERO	, P.A.	
DOCUMENT NUMI	BER: P11000103574		
	of Amendment and fee are su	abmitted for filing.	
Please return all corres	spondence concerning this ma	tter to the following:	
	DIEGO ROSERO		
		Name of Contact Person	1
	DIEGO ROSERO, P.A.		
		Firm/ Company	,
	3585 NE 207TH STREET. (800336)	
		Address	
	AVENTURA, FL 33180		
		City/ State and Zip Code	8
DIEG	O@MYKAPITAL.US		
	E-mail address: (to be us	sed for future annual report	notification)
For further information	n concerning this matter, pleas	se call:	
DIEGO ROSERO		at (543 7802
Name o	of Contact Person	Area Co	de & Daytime Telephone Number
Enclosed is a check for	r the following amount made	payable to the Florida Depa	urtment 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)
Ame Division P.O.	Ing Address Induction Side of Corporations Box 6327 Thanksee, FL 32314	Amend Divisio Clifton 2661 E	Address ment Section n of Corporations Building xecutive Center Circle assee, FL 32301

Articles of Amendment .to Articles of Incorporation of

(Name of C					
P11000103574	orporation as currenti	y filed with the Flori	da Dept. of State)	
11000103374	(Document Number of	f Corporation (if know	m)		
Oursuant to the provisions of section 607.100 ts Articles of Incorporation:	6, Florida Statutes, this	Florida Profit Corpor	ration adopts the f	ollowing ame	endment(s)
A. If amending name, enter the new name DIEGO ROSERO CALAD, P.A.	of the corporation:			T1	
name must be distinguishable and contain "Corp.," "Inc.," or Co.," or the designatio word "chartered," "professional association,	n "Corp," "Inc," or "	Co". A professional		the abbrev	
B. Enter new principal office address, if a	pplicable:	N/A			
Principal office address <u>MUST BE A STRE</u>				·	
				750 E	2
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)		N/A			N 1
-				~	[
		_			
					- ;
 If amending the registered agent and/or new registered agent and/or the new re 			the name of the	1.2	_
Name of New Registered Agent		_			
THIME OF THE MEEDIE CU APEN	· · · · · · · · · · · · · · · · · · ·		*****		
	(Florida str	eet address)		· · · · · · · · · · · · · · · · · · ·	
New Registered Office Address:	Α		, Florida		
		(City)		(Zip Code)	

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.

X Change	PI	John Do	e	
X Remove	<u>v</u>	Mike Jo	nes	
X Add	SV	Sally Sn	nith	
Type of Action (Check One)	Title		Name	Address
1) N/A Change	N/A		N/A	N/A
Add				
Remove				
2) Change				
Add		_		
Remove				
3) Change				
Add				
Remove				
Remove				
4)Change		_		
Add				
Remove				
5) Change		_		
Add				
Remove				
6)Change		_		
Add				
Remove				

E. If amending or adding additional Arti (Attach additional sheets, if necessary).	(Be specific)
N/A	

	· · · · · · · · · · · · · · · · · · ·
. If an amendment provides for an exch	ange, reclassification, or cancellation of issued shares,
provisions for implementing the ame	ndment if not contained in the amendment itself:
(if not applicable, indicate N/A) N/A	
· VA	
· · · · · · · · · · · · · · · · · · ·	
M++	

The date of each amendment(s) adoption; date this document was signed.	, if other than the
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 a document's effective date on the Department of State's records.	not be listed as the
Adoption of Amendment(s) (CHECK ONE)	
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)	
☐ The amendment(s) was/were adopted by the board of directors without shareholder action and shareholder action was not required.	
The amendment(s) was/were adopted by the incorporators without shareholder action and shareholder action was not required.	
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)	-
DIEGO ROSERO	
(Typed or printed name of person signing)	
PRESIDENT	
(Title of person signing)	