## P12000047608

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## **COVER LETTER**

**TO:** Amendment Section Division of Corporations

7,

NAME OF CORPORA	ATION: CITITECH GROU	P CORP		
DOCUMENT NUMBI	ER: P12000047608			
	f Amendment and fee are sul	bmitted for filing.		
Please return all corresp	ondence concerning this mat	ter to the following:		
J	OHN ARIZA			
-		Name of Contact Persor	l	
(	CITITECH GROUP CORP			
_		Firm/ Company	1.00-00	
1	1671 SW 50 CT			
Address				
(	COOPER CITY, FL 33330			
_		City/ State and Zip Code	•	
PITRI	N@AOL.COM			
	E-mail address: (to be us	ed for future annual report	notification)	
For further information	concerning this matter, pleas	e call:		
JOHN ARIZA		at ( 305	401 5073	
Name of	Contact Person	Area Co	de & Daytime Telephone Number	
Enclosed is a check for	the following amount made p	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)	
Mailing Address Amendment Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314		Street Address Amendment Section Division of Corporations Clifton Building 2661 Executive Center Circle Tallahassee, FL 32301		

## Articles of Amendment to Articles of Incorporation of

CITITECH GROUP CORP	CI'	Tľ	$\Gamma FC$	H	R.	OL	P	CO	RР
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P12000047608 (Document Number of		T
(Document Number of		7 - (1 - (1) - (7)
(2 Stanient Hamoer Cr	Corporation (if known)	
Pursuant to the provisions of section 607.1006, Florida Statutes, this <i>I</i> its Articles of Incorporation:	Florida Profit Corporation adopts the follow	wing amendm
A. If amending name, enter the new name of the corporation:		FI ORI
name must be distinguishable and contain the word "corporation "Corp.," "Inc.," or Co.," or the designation "Corp," "Inc.," or "Coword "chartered," "professional association," or the abbreviation "I	Co". A professional corporation name m	
B. Enter new principal office address, if applicable:	1331 NW 144 AVE	
(Principal office address MUST BE A STREET ADDRESS)	PEMBROKE PINES	
	FL 33028	
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)	1331 NW 144 AVE	
	PEMBROKE PINES	
	FL 33028	
D. If amending the registered agent and/or registered office addr- new registered agent and/or the new registered office address:		
Name of New Registered Agent		
Name of New Registered Agent  (Florida stre	et address)	- Appropriate proprieta de la compansa de la compa
	et address) , Florida	-

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 Doe	
X Remove	<u>V</u>	Mike Jones	
X Add	<u>sv</u>	Sally Smith	
Type of Action (Check One)	<u>Title</u>	<u>Name</u>	<u>Addres</u> s
1) Change	P	JOHN ARIZA	11671 SW 50 CT
Add			COOPER CITY
X Remove			FL 33330
2) X Change	P	PEDRO GOMEZ	1331 NW 144 AVE
Add			PEMBROKE PINES
Remove			FL 33028
3) Change	VP	ADRIANA DOMINGUEZ	1331 NW 144 AVE
X Add			PEMBROKE PINES
Remove			FL 33028
4) Change	<del>*</del>		-
Add			
Remove			
5) Change		_	
Add			
Remove			
6) Change	<del></del>		
Add			
Remove			

(Attach additi	or adding additional Articles, enter change(s) here: ional sheets, if necessary). (Be specific)
· · · · · · · · · · · · · · · · · · ·	
provisions (if not a	ment provides for an exchange, reclassification, or cancellation of issued shares, for implementing the amendment if not contained in the amendment itself: applicable, indicate N/A) endment provides for a reclassification of issued shares. The new percentage distribution of issued shares.
ollows:	
PEDRO GOM	1EZ President 50%
ADRIANA D	OMINGUEZ - Vice President 50%
<del></del>	

<b>₩</b> • • • •		
	September 1st, 2015	
The date of each amendment(s) addate this document was signed.	option:	, if other than the
Effective date if applicable:		
<del> </del>	(no more than 90 days after amendment file date)	
Note: If the date inserted in this bl document's effective date on the De	ock does not meet the applicable statutory filing requirements partment of State's records.	, this date will not be listed as the
Adoption of Amendment(s)	( <u>CHECK ONE</u> )	
The amendment(s) was/were ado by the shareholders was/were suf	oted by the shareholders. The number of votes cast for the amer ficient for approval.	ndment(s)
	oved by the shareholders through voting groups. The following each voting group entitled to vote separately on the amendment	
"The number of votes cast	or the amendment(s) was/were sufficient for approval	
by	, , , , , , , , , , , , , , , , , , , ,	
	(voting group)	
☐ The amendment(s) was/were ado action was not required.	oted by the board of directors without shareholder action and sh	areholder
☐ The amendment(s) was/were ado action was not required.	oted by the incorporators without shareholder action and shareholder	older
September Dated Signature	fue fur	
(By a di selected	rector, president or other officer – if directors or officers have n by an incorporator – if in the hands of a receiver, trustee, or ot diductory by that fiductory)	
	JOHN ARIZA	
	(Typed or printed name of person signing)	
	PRESIDENT	
•	(Title of person signing)	