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JIVISION OF CORPURATION

JUN 3 0 2016

C LEWIS

COVER LETTER

TO: Amendment Section Division of Corporations

NAME OF CORPORATION: Cortes General Se	ervices Inc.				
DOCUMENT NUMBER: P12000072942					
The enclosed Articles of Amendment and fee are se	ubmitted for filing.				
Please return all correspondence concerning this ma	atter to the following:				
Emmanuel Contreras Segovi	iano				
	Name of Contact Person	n			
Cortes General Services Inc.					
	Firm/ Company				
1801 Medford Ln					
	Address	M2 - M., /			
Brandon, FL 33511	Brandon, FL 33511				
	City/ State and Zip Code	e			
E-mail address: (to be u	sed for future annual report	notification)			
,	P ••••	······································			
For further information concerning this matter, plea	se call:				
Emmanuel Contreras Segoviano	at ()			
Emmanuel Contreras Segoviano at (813) 317-3887 Name of Contact Person Area Code & Daytime Telephone Num					
Enclosed is a check for the following amount made	payable to the Florida Depa	urtment of State:			
\$35 Filing Fee \$\text{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	Address ment Section n of Corporations Building xecutive Center Circle			

Tallahassee, FL 32301

Articles of Amendment to Articles of Incorporation of



2016 JUN 27 AM 11: 27

(Name of Corpora	tion as currently filed with the Florida Dept. of State)	
12000072942		
(Docu	ument Number of Corporation (if known)	·
rursuant to the provisions of section 607.1006, Flories Articles of Incorporation:	ida Statutes, this Florida Profit Corporation adopts the followi	ing amendmen
. If amending name, enter the new name of the	corporation:	
		The new
ame must be distinguishable and contain the wo Corp.," "Inc.," or Co.," or the designation "Cor word "chartered," "professional association," or th	ord "corporation," "company," or "incorporated" or the c rp," "Inc," or "Co". A professional corporation name must se abbreviation "P.A."	abbreviation t contain the
B. <u>Enter new principal office address, if applicab</u> Principal office address <u>MUST BE A STREET AL</u>	ole: DDRESS)	
		
Tutou non mailing address if analisable.		
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE B	<u></u>	
	<u></u>	
	<u></u>	
(Mailing address <u>MAY BE A POST OFFICE B</u>		
(Mailing address <u>MAY BE A POST OFFICE B</u>	tered office address in Florida, enter the name of the	
(Mailing address MAY BE A POST OFFICE B). If amending the registered agent and/or regist new registered agent and/or the new registere	tered office address in Florida, enter the name of the	
(Mailing address MAY BE A POST OFFICE B 1. If amending the registered agent and/or regist	tered office address in Florida, enter the name of the	
(Mailing address MAY BE A POST OFFICE B). If amending the registered agent and/or regist new registered agent and/or the new registere	tered office address in Florida, enter the name of the	
(Mailing address MAY BE A POST OFFICE B). If amending the registered agent and/or regist new registered agent and/or the new registere	ered office address in Florida, enter the name of the doffice address:	
(Mailing address MAY BE A POST OFFICE B D. If amending the registered agent and/or regist new registered agent and/or the new registered Name of New Registered Agent	tered office address in Florida, enter the name of the ed office address: (Florida street address)	o Code)
(Mailing address MAY BE A POST OFFICE B D. If amending the registered agent and/or regist new registered agent and/or the new registered Name of New Registered Agent	tered office address in Florida, enter the name of the address: (Florida street address)	o Code)
(Mailing address MAY BE A POST OFFICE B D. If amending the registered agent and/or regist new registered agent and/or the new registered Name of New Registered Agent New Registered Office Address:	(Florida street address) (City) (rered office address in Florida, enter the name of the domination o	o Code)
(Mailing address MAY BE A POST OFFICE B D. If amending the registered agent and/or regist new registered agent and/or the new registered Name of New Registered Agent New Registered Office Address: New Registered Agent's Signature, if changing Registered Agent's Signature, if cha	(Florida street address) (City) (rered office address) (Florida street address) (City) (City)	ŕ
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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 Do	<u>oe</u>	
X Remove	<u>v</u>	Mike Jones		
X Add	<u>sv</u>	Sally Sr	<u>nith</u>	
Type of Action (Check One)	<u>Title</u>		<u>Name</u>	Address
1) Change	P		Emmanuel Contreras Segoviano	1801 Medford Ln
Add				Brandon, FL 33511
X Remove				
2) Change		_		
Add				
Remove				
3) Change		_		
Add				
Remove				
4)Change				
Add				
Remove				
5) Change				
Add				
Remove				
6) Change		·		
Add		•	·	
Remove				

amending or adding additional A tach additional sheets, if necessary,). (Be specific)				
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n amendment provides for an ex	vahansa waalassifias	tion or cancelle	tion of issued	charoc	
ovisions for implementing the ar	mendment if not con	tained in the an	rendment itsel	f:	
(if not applicable, indicate N/A))				
					
			····		
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The date of each amendment(s) adoption:	if other than the
date this document was signed.		JIVISION OF CORPORATION
Effective date <u>if applicable</u> :	(no more than 90 days after amendment file date)	2016 JUN 27 AM11: 27
Note: If the date inserted in the document's effective date on the	is block does not meet the applicable statutory filing requirement Department of State's records.	s, this date will not be listed as the
Adoption of Amendment(s)	(<u>CHECK ONE</u>)	
The amendment(s) was/were by the shareholders was/were	adopted by the shareholders. The number of votes cast for the ame sufficient for approval.	endment(s)
	approved by the shareholders through voting groups. The followin for each voting group entitled to vote separately on the amendment	
"The number of votes of	ast for the amendment(s) was/were sufficient for approval	
by	."	
	(voting group)	
☐ The amendment(s) was/were action was not required.	adopted by the board of directors without shareholder action and si	hareholder
☐ The amendment(s) was/were action was not required.	adopted by the incorporators without shareholder action and sharel	holder
6/20/20 Dated	16	
Signature	$\gtrsim D$	
(By	a director, president or other officer – if directors or officers have exted, by an incorporator – if in the hands of a receiver, trustee, or cointed fiduciary by that fiduciary)	
	Emmanuel Contreras Segoviano	
	(Typed or printed name of person signing)	
	President	
	(Title of person signing)	