P12000074416

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COVER LETTER

TO: Amendment Section Division of Corporations

NAME OF CORPOR	ATION: A& A MORERA	SERVICES, INC			
DOCUMENT NUMB	P-12000074416				
The enclosed Articles of	f Amendment and fee are su	ibmitted for filing.			
Please return all corresp	condence concerning this ma	tter to the following:			
		ALEXANDER MORERA			
_	· · · · · · · · · · · · · · · · · · ·	Name of Contact Person	n		
		A&A MORERA SERVICI	ES,INC		
_		Firm/ Company			
		15121 SW 180 TER			
_		Address			
		MIAMI, FL 33187			
_		City/ State and Zip Cod	e		
	OSCAR@	@TAXBYOSCAR.COM			
	E-mail address: (to be us	sed for future annual report	notification)		
For further information	concerning this matter, pleas	se call:			
LEXANDER	R MORERA	at (at (374-6867		
Name of	Contact Person	at (786) 374-6867 Area Code & 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	☐\$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 Clitton Building 2661 Executive Center Circle			

Tallahassee, FL 32301

Articles of Amendment to Articles of Incorporation of

A&A MORERA SERVICES, INC

			-12 · ''
(Name of Corpo	ration as current	ly filed with the Florida Dept. of State)	J.
P-	12000074416		ン
(De	ocument Number o	f Corporation (if known)	7
Pursuant to the provisions of section 607,1006, Floits Articles of Incorporation:	orida Statutes, this	Florida Profit Corporation adopts the follow	ving amendme
A. If amending name, enter the new name of th	ie corporation:		
NONE			The new
name must he distinguishable and contain the "Corp.," "Inc.," or Co.," or the designation "Cword "chartered," "professional association," or	Corp," "Inc." or '	'Co". A professional corporation name mu	abbreviation
P. Enter now principal office address: if applie	n blo.	N/A	
B. Enter new principal office address, if applie (Principal office address MUST BE A STREET)			
			
C. Enter new mailing address, if applicable:		N/A	
(Mailing address MAY BE A POST OFFICE	(<u>BOX</u>)		
D. If amending the registered agent and/or reg	istered office add	ress in Florida, enter the name of the	
new registered agent and/or the new registe			
Name of New Registered Agent	N/A		
	(Florida sti	reet address)	
New Registered Office Address:		. Florida	
		(City) (2	(ip Code)
New Registered Agent's Signature, if changing			
I hereby accept the appointment as registered age	nt. I am familiar	with and accept the obligations of the positio	n.

Signature of New Registered Agent, if changing

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	<u>PT</u>	<u>John Doe</u>	
X Remove	<u>V</u>	Mike Jones	
X Add	<u>SV</u>	Sally Smith	
Type of Action (Check One)	Title	<u>Name</u>	Address
1) Change	SEC	MANUEL TABERNER	9429 FONTANBLEAU BLVD
X Add			MIAMI, FL 33172
Remove			
2) Change		_	
Add			
Remove			
3) Change			
Add			
Remove			
4) Change			
Add			
Remove			
5) Change			
Add			
Remove			
6) Change			
			
Add Remove			

(Attach a	ling or adding a dditional sheets,	dditional Arti if necessary).	cles, enter ch (Be specific	ange(s) here:				
	N/A							
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lf an am	endment provid	les for an excl	iange, reclas:	sification, or	cancellation of	issued shares,		
provisi	ons for impleme not applicable, in	nting the ame	ndment if no	t contained in	the amendme	ent itself:		
19	N/A	tactae 1971)						
								
						<u></u>		
				 				
							····	

	AUGUST 01, 2017	
The date of each amendment(s) ac	loption:	, if other than th
date this document was signed.		
Effective date <u>if applicable</u> :	AUGUST 01, 2017	
знестие цате <u>и аррисавие</u> .	(no more than 90 days after amendment file date)	
Note: If the date inserted in this bedocument's effective date on the De	lock does not meet the applicable statutory filing requirements, this date partment of State's records.	will not be listed as th
Adoption of Amendment(s)	(<u>CHECK ONE</u>)	
☐ The amendment(s) was/were add by the shareholders was/were su	opted by the shareholders. The number of votes east for the amendment(s) flicient for approval.	
	proved by the shareholders through voting groups. The following statement each voting group entitled to vote separately on the amendment(s):	
	for the amendment(s) was/were sufficient for approval	
by	(voting group)	
•	(voting group)	
action was not required.	opted by the board of directors without shareholder action and shareholder opted by the incorporators without shareholder action and shareholder	
	7	
08/01/201 Dated Signature	Claximatia Horasa	
selecte	irector, president or other officer – if directors or officers have not been d, by an incorporator – if in the hands of a receiver, trustee, or other court ted fiduciary by that fiduciary)	
	ALEXANDER MORERA	
	(Typed or printed name of person signing)	
	PRESIDENT	
	(Title of person signing)	