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(Re	questor's Name)	<u>_</u>
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PICK-UP	WAIT	MAIL
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JAN () 8 2029 I ALBRITTON

COVER LETTER

TO: Amendment Section Division of Corporations

NAME OF CORPOR	RATION: SMART COPIERS	SINC.	
DOCUMENT NUMI			
The enclosed Articles	of Amendment and fee are su	bmitted for filing.	
Please return all corres	spondence concerning this mat	tter to the following:	
	YAXONY NUNEZ		
	SMART COPIERS INC.	Name of Contact Person	1
		Firm/ Company	
	8320 NW 56TH STREET	,	
	•	Address	
	DORAL, FLORIDA 33166		
		City/ State and Zip Code	:
HME	NEZACCOUNTING@GMA	IL COM	
		ed for future annual report	notification)
			,
For further information	n concerning this matter, pleas	e call:	
YAXONY NUNEZ		at (305	741-8180
			de & Daytime Telephone Number
Enclosed is a check fo	r 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)
Ame Divi P.O.	ling Address endment Section sion of Corporations Box 6327 ahassee, FL 32314	Amend Divisio Clifton 2661 E	Address Iment Section on of Corporations Building Executive Center Circle USSEC, FL 32301

Articles of Amendment to Articles of Incorporation of

	of				
SMART COPIERS					
(<u>Name o</u>	f Corporation as currently f	iled with the Florida Dep	t. of State)		
P13000007472					
	(Document Number of C	orporation (if known)			
Pursuant to the provisions of section 607. its Articles of Incorporation:	1006, Florida Statutes, this <i>Fl</i>	orida Profit Corporation w	dopts the following	g amendn	nent(s) to
A. If amending name, enter the new na	me of the corporation:				
				_The _ne	
name must be distinguishable and cont "Corp.," "Inc.," or Co.," or the designa- word "chartered," "professional associat	ation "Corp," "Inc," or "Ce	A professional corpor			
B. <u>Enter new principal office address, i</u> (Principal office address <u>MUST BE A ST</u>					
C. Enter new mailing address, if applie (Mailing address MAY BE A POST C			SECULATION OF SECURATION OF SE	2019 NOV 26 PM :	FILED
D. If amending the registered agent an new registered agent and/or the new		s in Florida, enter the nar	ne of the	<u>3.</u> [9	
Name of New Registered Agent	YAXONY NUNEZ				
Name of New Registerea Agent					
	8320 NW 56TH STREET				
	8320 NW 56TH STREET (Florida street	address)	 -		
New Registered Office Address:		address)	. Florida 33166		

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)

Example:

X Change

Please note the officer/director title by the first letter of the office title:

John Doe

<u>PT</u>

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 Remove	<u>V</u>	Mike Jo	<u>ones</u>	
X Add	<u>sv</u>	<u>Sally Sr</u>	nith	
Type of Action (Check One)	<u>Title</u>		Name	<u>Address</u>
1) Change	<u>р</u>	_	SOBEIDA ESPINAL MARTINEZ	8320 NW 56TH STREET
Add				DORAL, FLORIDA 33166
X Remove				
2) Change		_		
Add				
Remove				
3) Change		_		
Add				
Remove				
4) Change		_		
Add				144
Remove				
5) Change		_		
Add				
Remove				
6) Change				
Add		_		
Remove				
				- · · · ·

(Attach additional sheets, if necessary). (Be specific)
 -

. If an amendment provides for an exchange, reclassification, or cancellation of issued shares, provisions for implementing the amendment if not contained in the amendment itself:
(if not applicable, indicate N/A)

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 b document's effective date on the De	lock does not meet the applicable statutory filing requirements, this date will not be listed as the partment of State's records.
Adoption of Amendment(s)	(<u>CHECK ONE</u>)
The amendment(s) was/were ado by the shareholders was/were su	pted by the shareholders. The number of votes cast for the amendment(s) flicient for approval.
	roved 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)
☐ The amendment(s) was/were ado action was not required.	pted by the board of directors without shureholder action and shareholder
☐ The amendment(s) was/were ado action was not required.	pted by the incorporators without shareholder action and shareholder
Dated	rector, president or other efficer – if directors or officers have not been
	l, by an inepreparator – if in the hands of a receiver, trustee, or other court
	ed fiduciary by that fiduciary)
	YAXONWNUNEZ
	(Typed or printed name of person signing)
	PRESIDENT
•	(Title of person signing)

The date of each amendment(s) adoption: _______, if other than the