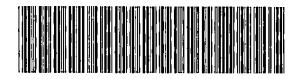
P130000 10893

(Requestor's Name)				
(Address)				
(Address)				
(City/State/Zip/Phone #)				
PICK-UP WAIT MAIL				
(Business Entity Name)				
(Document Number)				
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2019 £PR 16 PH 3: 40

Amend

APR 1 6 2019

I ALBRITTON

COVER LETTER

Division of Corporations NAME OF CORPORATION: Napoles Suites Corp DOCUMENT NUMBER: P13000010893 The enclosed Articles of Amendment and fee are submitted for filing. Please return all correspondence concerning this matter to the following: Felix F. Gavidia Name of Contact Person Napoles Suites Corp. Firm/ Company 8300 NW 53 St. - Ofc 302 Address Miami, Fl. 33166 City/ State and Zip Code guarantorloan.loan@gmail.com E-mail address: (to be used for future annual report notification) For further information concerning this matter, please call: Felix F. Gavidia Name of Contact Person Enclosed is a check for the following amount made payable to the Florida Department of State: ■ \$35 Filing Fee □\$43.75 Filing Fee & □\$43.75 Filing Fee & □\$52.50 Filing Fee Certificate of Status Certified Copy Certificate of Status (Additional copy is Certified Copy enclosed) (Additional Copy is enclosed) **Mailing Address** Street Address

Amendment Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314

TO: Amendment Section

Amendment Section
Division of Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, FL 32301



March 20, 2019

FELIX F. GAVIDIA NAPOLES SUITES CORP. 8300 NW 53 ST - OFC 302 MIAMI, FL 33166

SUBJECT: NAPOLES SUITES CORP.

Ref. Number: P13000010893

We have received your document for NAPOLES SUITES CORP. and your check(s) totaling \$35.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

Please check the appropriate box on the amendment form regarding the adoption of the amendment(s).

The registered agent must sign accepting the designation.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6050.

Irene Albritton Regulatory Specialist II

Letter Number: 719A00005543

2019 APR 16 PM 2: 10 SECREDAD AND DISCORD

Articles of Amendment to Articles of Incorporation of

Napoles Suites Corp				
(Name o	of Corporation as curren	tly filed with the Florida	Dept. of State)	
P13000010893				
	(Document Number of	of Corporation (if known)		
Pursuant to the provisions of section 607, its Articles of Incorporation:	1006. Florida Statutes, this	s Florida Profit Corporat	ion adopts the following amer	idment(s) to
A. If amending name, enter the new na	me of the corporation:			
			7U	
name must be distinguishable and com "Corp.," "Inc.," or Co.," or the design word "chartered," "professional associa	ation "Corp," "Inc," or	"Co". A professional co	The proporated or the abbrevior or the abbrevior or the abbrevior or the abbrevial or the a	ation
B. Enter new principal office address,	if annlicable:	8300 NW 53 St		
(Principal office address MUST BE A STREET ADDRESS)		Suite 302	- 100 PM	2
		Doral, Fl. 33166		方でに
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)				1 15 PH
D. If amending the registered agent an new registered agent and/or the new			e name of the	3: 40
Name of New Registered Agent	Felix F. Gavidia			
	(Florida si	reet address)		
New Registered Office Address	8300 NW 53 St. Suite 302		Storida 33166	
The British of the Thurses.	(City)		(Zip Code)	
New Registered Agent's Signature, if cl hereby accept the appointment as registe	ered agent. I am familiar	with and accept the oblig		
New Registered Office Address: New Registered Agent's Signature, if classes hereby accept the appointment as registered.	8300 NW 53 St. Suite 30. nanging Registered Agenered agent. I am familiar	(City)	. Florida Zip Code) wations of the position.	_

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	Gino Dapello	11021 SW 28 Ct	
Add			Davie, Fl. 33328	
X Remove				
2) Change	P	Felix F. Gavidia	8300 NW 53 St.	
X Add			Suite 302	
Remove			Doral, Fl. 33166	
3) Change				
Add				
Remove				
) Change				
Add				
Remove				
Change				
Add				
Remove				
_ Change				
_ Add	-			
_ Remove				

ttach additional sheets, if necessary).	ticles, enter change(s) here: (Be specific)
	· · · · · · · · · · · · · · · · · · ·
an amendment provides for an exch rovisions for implementing the ame (if not applicable, indicate N/A)	nange, reclassification, or cancellation of issued shares, adment if not contained in the amendment itself:

ne date of each amendment(s) adoption:	, if other than the
date this document was signed.	
January 1th, 2019 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 require document's effective date on the Department of State's records.	ments, this date will not be listed as the
Adoption of Amendment(s) (CHECK ONE)	
The amendment(s) was/were adopted by the shareholders. The number of votes east for the by the shareholders was/were sufficient for approval.	amendment(s)
☐ The amendment(s) was/were approved by the shareholders through voting groups. The foll must be separately provided for each voting group entitled to vote separately on the amend	owing statement dment(s):
"The number of votes cast for the amendment(s) was/were sufficient for approval	
by Mayority	
(voting group)	
The amendment(s) was/were adopted by the board of directors without shareholder action a action was not required.	nd shareholder
The amendment(s) was/were adopted by the incorporators without shareholder action and slaction was not required.	hareholder
Janauary 1st, 2019 Dated	
Signature	
(By a director, president or other officer – if directors or officers h selected, by an incorporator – if in the hands of a receiver, trustee, appointed fiduciary by that fiduciary)	ave not been or other court
Felix F. Gavidia	
(Typed or printed name of person signing)	
President	
(Title of person signing)	