P 3000 14352

(Re	questor's Name)			
. (Ad	dress)			
(Add	dress)			
(Cit	y/State/Zip/Phone #)			
PICK-UP	☐ WAIT	MAIL		
(Bu	siness Entity Name)			
(Do	cument Number)	<u></u>		
Certified Copies	_ Certificates of	Status		
Special Instructions to Filing Officer:				
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FLORIDA DEPARTMENT OF STATE Division of Corporations

July 6, 2017

ALEJANDO GUGLIOTTA UNEKUAL, INC 2400 BRICKELL AVENUE STE 306D MIAMI, FL 33129

SUBJECT: UNEKUAL, INC. Ref. Number: P13000014352

We have received your document for UNEKUAL, INC. and your check(s) totaling \$52.50. However, the enclosed document has not been filed and is being returned for the following correction(s):

Amendments for Florida profit corporations are filed in compliance with section 607.1006, Florida Statutes. Please see the enclosed information.

We are enclosing the proper form(s) with instructions for your convenience.

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.

Shelia H Young Regulatory Specialist II

Letter Number: 517A00013645

ZOIT JUL 24 AM IN: 31.
SECHETARY OF STATE
ALLAHASSEE, FLORIDA

COVER LETTER

TO: Amendment Section Division of Corporations NAME OF CORPORATION: Unekval, Inc. DOCUMENT NUMBER: P13000014352 The enclosed Articles of Amendment and fee are submitted for filing. Please return all correspondence concerning this matter to the following: Unekual, Inc Firm/Company M: am; FL 33129 City/ State and Zip Code be aune kual, (om
E-mail address: (to be used for future annual report notification) For further information concerning this matter, please call: at (305) 331 - 31 02

Area Code & Daytime Telephone Number Enclosed is a check for the following amount made payable to the Florida Department of State:

Mailing Address

■ \$35 Filing Fee

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

□\$43.75 Filing Fee &

Certificate of Status

Street Address

□\$43.75 Filing Fee &

(Additional copy is

Certified Copy

enclosed)

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

□\$52.50 Filing Fee

Certified Copy

(Additional Copy is enclosed)

Certificate of Status

Articles of Amendment to Articles of Incorporation of

with the Florida Dept. of State)
52
oration (if known)
a Profit Corporation adopts the following amendment(s) to
The new
ompany," or "incorporated" or the abbreviation A professional corporation name must contain the
7
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Florida, enter the name of the
11.
e 3060
(ress)
Florida 33124
(Zip Code)
ed accept the obligations of the position.
red 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.

Example: X Change	<u>PT</u> <u>Johr</u>	<u>1 Doe</u>	
X Remove	<u>V</u> <u>Mik</u>	e Jones	
X Add	<u>SV</u> <u>Sall</u>	y Smith	
Type of Action (Check One)	<u>Title</u>	<u>Name</u>	<u>Addres</u> s
1) Change	PT	José Luis Alugrez Truvillo	366 Canal St, suite 3150
Add Remove			New Orleans, LA 70130
2)Change	DR	Edmundo Gugliotta	PO Box 561990
Add Remove			Miami, FL 33256
3) X Change	PT	AleJandro Gyglrotla	2400 Brickell Ave suite 3060
Add			M: am:, FL 33129
4) Change			
Add			
5) Change			
Add			
6) Change			
Add			
Pamovo			

Attach additional sheets, if necessary).	icles, enter change(s) here: (Be specific)
•	18
, ,	
If an amendment provides for an exc	hange, reclassification, or cancellation of issued shares,
provisions for implementing the ame	endment if not contained in the amendment itself:
(if not applicable, indicate N/A)	
	A STATE OF THE STA

The date of each amendment(s) adoption: _	6/22/2017	, if other than the
date this document was signed.	1	
Effective date if applicable: 6/2	2/2017 (no more than 90 days after amendment file dat	
	(no more than 90 days after amendment file dat	e)
Note: If the date inserted in this block does document's effective date on the Department of	not meet the applicable statutory filing requirement f State's records.	nts, this date will not be listed as the
Adoption of Amendment(s) (C	HECK ONE)	
The amendment(s) was/were adopted by the by the shareholders was/were sufficient for	e shareholders. The number of votes cast for the an approval.	nendment(s)
	he shareholders through voting groups. The following group entitled to vote separately on the amendment	
	endment(s) was/were sufficient for approval	
by	oting group)	
(v	oting group)	
☐ The amendment(s) was/were adopted by th action was not required.	e board of directors without shareholder action and	shareholder
☐ The amendment(s) was/were adopted by th action was not required.	e incorporators without shareholder action and shar	reholder
Dated		
Simultura		
Signature(By a direction, bro	esident or other officer – if directors or officers have	e not been
selected, by an in	corporator - if in the hands of a receiver, trustee, or	r other court
appointed fiducia	ry by that fiduciary)	
	(Typed or printed name of person signing)	
	(Typed or printed name of person signing)	
	<u>^ 1</u>	
	(Title of person signing)	