P13000029775

(Requestor's Name)
(Address)
(Address)
(1887888)
(City/State/Zip/Phone #)
PICK-UP WAIT MAIL
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(Business Entity Name)
(Document Number)
Certified Copies Certificates of Status
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Special Instructions to Filing Officer:
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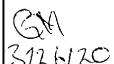
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St CAS TARY OF STATE
DIVISION OF CHECKET AND THE



COVER LETTER

TO: Amendment Sec Division of Corp		•	
NAME OF CORPO	RATION: CHEVRON 369 II	NC	
DOCUMENT NUM	BER: P13000029775		·
The enclosed Articles	s of Amendment and fee are su	ibmitted for filing.	
Please return all corre	espondence concerning this ma	itter to the following:	
	Andres Mor		
		Name of Contact Perso	n
	Chevron 369 Inc		
		Firm/ Company	
	8970 W Flagler St. Apt. 213		
		Address	
	Miami/Fl/33174		
		City/ State and Zip Coc	le
	amshellcorporation@gmail.c	om	
		sed for future annual repor	t notification)
For further informatic	on concerning this matter, pleas	se call:	
Andres Mor		305	7737622 ode & Daytime Telephone Number
Name	of Contact Person	Area Co	ode & Daytime Telephone Number
Enclosed is a check for	or the following amount made	payable to the Florida Dep	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)
Mailing Address Amendment Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314		Ameno Divisio The C 2415	Address Iment Section on of Corporations Tentre of Tallahassee N. Monroe Street, Suite 810 assec, FL 32303

Articles of Amendment to Articles of Incorporation of

CHEVRON 369 INC

•

CHECKOTO SOJEKO	
(Name of Corporation as currently filed with the Florida Dept. of State)	
P13000029775	
(Document Number of Corporation (if known)	
Pursuant to the provisions of section 607.1006, Florida Statutes, this <i>Florida Profit Corporation</i> adopts the following its Articles of Incorporation:	g amendment(s)
A. If amending name, enter the new name of the corporation:	
	The new
name must be distinguishable and contain the word "corporation," "company," or "incorporated" or the abbreviatio "Inc.," or Co.," or the designation "Corp," "Inc," or "Co". A professional corporation name must contain "chartered," "professional association," or the abbreviation "P.A."	on "Corp.,"
B. Enter new principal office address, if applicable:	
(Principal office address MUST BE A STREET ADDRESS)	<u> </u>
	
	 _
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)	
	
D. If amending the registered agent and/or registered office address in Florida, enter the name of the new registered agent and/or the new registered office address:	
Name of New Registered Agent	
	-
(Florida street address)	-
New Registered Office Address: , Florida,	
	Code)
New Registered Agent's Signature, if changing Registered Agent: I hereby accept the appointment as registered agent. I am familiar with and accept the obligations of the position.	AVISION OF SCHLED
Signature of New Registered Agent, if changing	- 🚊 🕍
	7
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☐ The amendment(s) is/are being filed pursuant to s. 607.0120 (11) (e), F.S.

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; CE() = Chief Executive Officer; CF() = 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 Doc	
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	V	ALEJANDRA MARTINEZ	8970 W FLAGLER ST. APT 213
Add			MIAMI, FL 33174
X Remove			
2) Change			
Add			
Remove 3) Change			
Add			
Remove			
4) Change			
Add			
Remove			
5) Change		-	_
Add			
Remove			<u> </u>
6) Change			
Add			
Remove			

(Attach <i>additional sheets, if nece</i>	ssary). (Be specifi	thange(s) here: ic)		
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		<u> </u>		
If an amendment provides for				
provisions for implementing to	he amendment if n	of contained in th	<u>ie amendment itse</u>	<u>II:</u>
	•			
				
			 	
				· · · · · · · · · · · · · · · · · · ·
		-		

	doption:	, if other than th
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 bedocument's effective date on the De	lock does not meet the applicable statutory filing requirements, this date partment of State's records.	te will not be listed as t
Adoption of Amendment(s)	(CHECK ONE)	
The amendment(s) was/were add action was not required.	opted by the incorporators, or board of directors without shareholder action	on and shareholder
☐ The amendment(s) was/were add by the shareholders was/were st	opted by the shareholders. The number of votes cast for the amendment(afficient for approval.	s)
must he separately provided for	proved by the shareholders through voting groups. The following statemed each voting group entitled to vote separately on the amendment(s):	ent
	for the amendment(s) was/were sufficient for approval	
by	(voting group)	
Dated	_03/05/20 fondocas	
Signature	- Indered	
(By a d	rector, 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 cour d fiduciary by that fiduciary) 	t
	And 115 Hon (Typed or printed name of person signing)	
	President	
	(Title of person signing)	