P130000 41769

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MAR 25 2013 C MCNAIR

COVER LETTER

TO: Amendment Section Division of Corporations

NAME OF CORPORATION: CITIS, CORP.			_ %;2.	
DOCUMENT NUMB	P13000041760			
The enclosed Articles	of Amendment and fee are su	bmitted for filing.		
Please return all corres	pondence concerning this ma	tter to the following:		, in
	CAROLYN KAHL			
Name of Contact Person				
	ROCA GONZALEZ P.A.			
•		Firm/ Company		
	3370 MARY STREET			
•		Address		
	MIAMI, FL 33133			
		City/ State and Zip Cod	e	<u>_</u>
CKAI	HL@RGPA.COM			
	E-mail address: (to be us	sed for future annual report	notification)	-
For further information	n concerning this matter, pleas	se call:	859-6050	
Name o	of Contact Person	at (Area Co) ode & Daytime Telephone Ni	umber
	the following amount made		•	
S35 Filing Fee	☐S43.75 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 Divis P.O.	ndment Section sion of Corporations Box 6327 shassee, Fl. 32314	Ameno Divisio Clifton 2661 E	Address dment Section on of Corporations a Building Executive Center Circle assec, FL 32301	

Articles of Amendment Articles of Incorporation of

THE THE PARTY OF T CITIS, CORP. (Name of Corporation as currently filed with the Florida Dept. of State) P13000041769 (Document Number of Corporation (if known) Pursuant to the provisions of section 607.1006, Florida Statutes, this Florida Profit Corporation adopts the following amendment(s) to its Articles of Incorporation: A. If amending name, enter the new name of the corporation: name must be distinguishable and contain the word "corporation," "company," or "incorporated" or the abbreviation "Corp.," "Inc.," or Co.," or the designation "Corp," "Inc," or "Co". A professional corporation name must contain the word "chartered," "professional association," or the abbreviation "P.A." B. Enter new principal office address, if applicable: (Principal office address MUST BE A STREET ADDRESS) 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 (City) 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.

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.

Example: X Change	<u>PT</u>	John Doe	
X Remove	$\underline{\mathbf{v}}$	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	VP	NARA G CAROZZI	3370 MARY STREET
XAdd			MIAMI, FL 33133
Remove			
2) Change			
Add			
Remove			
3) Change			
Add			
Remove			
4) Change			
Add			
Remove			
5) Change			
Add			
Remove			<u></u>
6) Changa			
6) Change			
Add			
Remove			<u> </u>

If amending or adding additional Arti Attach additional sheets, if necessary).	(Be specific)
	
	
(f	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)	
	-
	

The data of each amendment(s)	adoption:	, if other than the
date this document was signed.	•	
Effective date <u>if applicable</u> :	(no more than 90 days after amendment file date)	
Note: If the date inserted in this document's effective date on the I	s block does not meet the applicable statutory filing requirements, this date will a Department of State's records.	not be listed as the
Adoption of Amendment(s)	(CHECK ONE)	
☐ The amendment(s) was/were a by the shareholders was/were	idopted by the shareholders. The number of votes east for the amendment(s) sufficient for approval.	
☐ The amendment(s) was/were a must be separately provided f	approved by the shareholders through voting groups. The following statement for each voting group entitled to vote separately on the amendment(s):	
"The number of votes ca	ast for the amendment(s) was/were sufficient for approval	
by	(voting group)	
	adopted by the board of directors without shareholder action and shareholder	
The amendment(s) was/were a action was not required.	adopted by the incorporators without shareholder action and shareholder	
02/26/20 Dated		
sele	a director, president or other officer – if directors or officers have not been cted, by an incorporator – if in the hands of a receiver, trustee, or other court ointed fiduciary by that fiduciary)	-
	DANIELA S. CAROZZI	
	(Typed or printed name of person signing)	
	PRESIDENT	
	(Title of person signing)	