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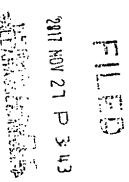
(Requestor's Name)
(Address)
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(City/State/Zip/Phone #)
PICK-UP WAIT MAIL
(Business Entity Name)
(Document Number)
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COVER LETTER

TO: Amendment Section Division of Corporations

NAME OF CORPOR	ATION:	ANDTINA	CORP		
DOCUMENT NUMB	- - · -	P1300004	2593		
	of Amendment and fee are su	bmitted for filing	·		
	pondence concerning this ma				
Treate rotter an owner	pg				
		CARLOS PR	ECIADO		
	Name of Contact Person				
_		ANDTINA	CORP		
		Firm/ Co		,	
	3620 NW 27TH AVE				
	Address				
		MIAMI FLOR	IDA 33142	2	
·		City/ State an	d Zip Cod	Ů.	
	AN	DTINACORP@0	GMAIL.C	OM	
4	E-mail address: (to be u	sed for future and	nual report	notification)	
For further information	concerning this matter, pleas	se call:			
CARLO	at (917	7541807		
Name o	of Contact Person		Area Co	de & Daytime Telephone Number	
Enclosed is a check for	the following amount made	payable to the Fl	orida Depa	artment of State:	
S35 Filing Fee	□\$43.75 Filing Fee & Certificate of Status	□\$43.75 Filir Certified Co (Additional of enclosed)	ру	☐\$52.50 Filing Fee Certificate of Status Certified Copy (Additional Gopy is enclosed)	
<u>Mail</u>			Address Iment Section		
Ame Divi:			on of Corporations		
P.O.		Clifton	ı Building		
ı alla	ihassee, FL 32314		∠001 F	Executive Center Circle	

Tallahassee, FL 32301

Articles of Amendment to Articles of Incorporation

les of Incorporation of

(Name of Corporation as currently filed with the Florida Mark of Stage) P 3 t 3
P13000042593

(Document Number of Corporation (if known) (if kn

				The ne
name must be distinguishable and contain the "Corp.," "Inc.," or Co.," or the designation "Cword "chartered," "professional association," or	Corp." "Inc." or "Co".	ompany, or inco A professional corp	orporatea or poration name	must contain t
		20 NW 27TH AVE N	MIAMI FLORI	DA 33142
B. Enter new principal office address, if applic (Principal office address MUST BE A STREET)		·	1	
			i	
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE		3620 NW 27TH AVE MIAMI FLORIDA (DA 33142
		_		
D. If amending the registered agent and/or registered agent and/or the new registered.		Florida, enter the	name of the	
Name of New Registered Agent	CARLOS PRECIA	NDO	_	
	3620 NW 27TH AVE			
·	(Florida street ado	lress)		
New Revistered Office Address	MIAMI		Florida	33142

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

(City)

(Zip Code)

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: \underline{X} Change	<u>PT</u>	John Dg	<u>e</u>	
X Remove	<u>v</u>	Mike Jo	nes	
<u>X</u> Add	<u>sv</u>	Sally Sn	<u>nith</u>	
Type of Action (Check One)	<u>Title</u>		<u>Name</u>	Address
1) Change				
Add				<u> </u>
Remove				
2) Change		_		
Add				
Remove				
3) Change		_		
Add				
Remove				
4) Change				
Add		_		
Remove				
5) Change		_		
Add				
Remove				<u></u>
6) Change				
Add				
Remove				

amending or adding additional Articles, enter change(s) here attach additional sheets, if necessary). (Be specific)	
	:
	
an amendment provides for an exchange, reclassification, or provisions for implementing the amendment if not contained	r cancellation of issued shares, in the amendment itself: 1
(if not applicable, indicate N/A)	
	l .

	11/17/2017		
The date of each amendment(s) adop		, if other	than the
date this document was signed.		r F	
nee at a la de comita de la	11/17/2017	,	
Effective date <u>if applicable</u> :	(no more than 90 days after amendm	ent file date)	
	de la companya de contracto de c	and the same of the day will not be like	
Note: If the date inserted in this oloc locument's effective date on the Depa	ck does not meet the applicable statutory filing rement of State's records.	requirements, this date will not be risk	za as aic
•		l	
Adoption of Amendment(s)	(<u>CHECK ONE</u>)	1	
☐ The amendment(s) was/were adopte by the shareholders was/were suffice	ed by the shareholders. The number of votes cas cient for approval.	t for the amendment(s)	
	ved by the shareholders through voting groups, ach voting group entitled to vote separately on the		
"The number of votes cast for	r the amendment(s) was/were sufficient for appro	val	
by	(voting group)	··	
	(voting group)		
■ The amendment(s) was/were adopte action was not required.	ed by the board of directors without shareholder	action and shareholder	
☐ The amendment(s) was/were adopte action was not required.	ed by the incorporators without shareholder action	on and shareholder	
11/17	/2017		
Dated			
Signature	CD_P-P		
	etor, president or other officer – If directors or o	flicers have not been	
	by an incorporator – if in the hands of a receiver. I fiduciary by that fiduciary)	trustee, or other court	
••	CARLOS PRECIADO	•	
_	(Typed or printed name of person signi	ng)	
	PRESIDENT		
	(Title of person signing)		