Note: Please print this page and use it as a cover sheet. Type the fax audit number (shown below) on the top and bottom of all pages of the document.

(((H22000404946 3)))



H220004049463ABC+

Note: DO NOT hit the REFRESH/RELOAD button on your browser from this page. Doing so will generate another cover sheet.

To:

Division of Corporations

Fax Number : (850)617-6380

From:

Account Name : JELEN ACCOUNTING SERVICES, INC

Account Number : I20120000052 Phone : (305)591-9180 Fax Number : (305)591-9167

- ME OF SHE OF **Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please.**

-Email Address: 1/160@ JEKEN accounting c

COF AMND/RESTATE/CORRECT OR O/D RESIGN BALFER CORP

Certificate of Status	0
Ce:tified Copy	0
Page Count	05
Estimated Charge	\$35.00

A. RAMSEY

Electronic Filing Menu

Corporate Filing Menu

Help

https://efile.sunbiz.org/scripts/efilcovr.exe

1/1

Articles of Amendment to Articles of Incorporation of

FILED

2022 DEC -1 PH 12 07

BALFER CORP		[662 5 -
(Ni me	of Corporation as currently filed with the	Florida Dept. of State)
P13000044919		<u> </u>
	(Document Number of Corporation (i	(krown)
	, i	•
Pursuant to the provisions of section 607 ts Articles of Incorporation:	.1006, Florida Statutes, this Florida Profit	Corporation adopts the following amendment(s)
A. If amending name, enter the new n	ame of the corporation:	
agma muse ha disain suit 11 - 1		The new
ume must be distinguishable and contail Inc., " or Co.," or the design vito.; "(chartered," "professional association,	Corp." "Inc." or "Co". A professional.	incorporated" or the abbreviation "Corp.," corporation name must contain the word
B. Enter new principal office address, Principal office address <u>MUSI BE A S</u>	If applicable:	
. Enter new mailing address, if a pol	icable:	·
(Mailing address MAY BE A PCST	OFFICE BOX)	_
		
. If amending the registered prent ar	dior registered office address in Florida.	enter the name of the
new registered agent and/or the new	v registered office address:	
Name of New Registere: Agent	MIGUEL A BALDEON TAPIA	
	(Florida street address)	
New Registered Office 2 ddryss:	,	
	(City)	Florida (Zip Code)
	(0.0,0)	(Lip Code)
ew Registered Agent's Signature, if cl	nanging Registered Agent:	
hereby accept the appointment as regist	ered agent. I am familiar with and accept t	the obligations of the position.
	_	
	215	
	Signature of New Registered Agent.	ifchancing
	organiste of them negative Agent,	y chunging
neck if applicable		
] The amendment(s) is/are being filed pr	rsuant to s. 607.0120 (11) (c), 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; 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	PT John	ı Doc			
X Remove	<u>V</u> <u>}Mik</u>	Mike Jones			
X Add	<u>SY</u> Bally	Sally Smith			
Type of Action (Check One)	Title:	Name	<u>Addres</u> s		
I) Change	TSVI	JAS X FERAUD	4851 NW 79 AVENUE		
Add			SUITE 5		
X Remove			Doral, FL 33166		
2) Change	<u>D</u>	JAVIER ALBAN	4851 NW 79 AVENUE		
Add			SUITE 5		
X Remove Change			Doral, FL 33166		
Add					
Remove					
4) Change					
Add					
Remove					
5) Change					
Aċd					
Remove					
6) Change					
Add					
Remove					

ending or adding addit a additional sheets, if we	cersary). (Be speci	fic)		
		<u>-</u>	*	
			· · · · · · · · · · · · · · · · · · ·	·
,,				<u> </u>
-				
,,				
		<u> </u>		
				
	 ,		·	
				
<u></u>				
		-		
				
	_			
				
mendment provides in	r an exchange, recla	sification, or cancella	tion of issued shar	es.
SIDES FOR BUILDING STREET, STR	t tre amenament it h	ot contained in the am	endment itself:	-
not applicable, indicat	e n/A)			
				·
	— ———			
				
				· · · · · · · · · · · · · · · · · · ·
				
	· · · · · · · · · · · · · · · · · · ·			
	— 			
				-

The date of each amendment(+) a	coption:	, 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 bedocument's effective date on the De	lock does not meet the applicable statutory filing requirepartment of State's records.	ements, this date will not be listed as the
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 s	hareholder action and shareholder
The amendment(s) was/were add by the shareholders was/were su	opted by the shareholders. The number of votes east for the ficient for approval.	he amendment(s)
☐ The amendment(s) was/were app must be separately provided for	proved by the shareholders through voting groups. The for each voting group entitled to vote separately on the american	llowing statement adment(s):
'The number of votes east	for the amendment(s) was/were sufficient for approval	
by	9	
	(voting group)	
11/23/2022 Dated		
Signature	wleech films	
seléute	rector, president or other officer – if directors or officers by an incorporater – if in the hands of a receiver, trusted fiduciary by that fiduciary)	have not been e, or other court
	MIGUEL A BALDEON TAPIA	
	(Typed or printed name of person signing)	
	1•	
	(Title of person signing)	