P13000056893

Office Use Only



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SEP 1.6 2015

C. CARROTHERS

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COVER LETTER

TO: Amendment Section Division of Corporations

NAME OF CORPORATION	ON:	OP CORP		
DOCUMENT NUMBER:	· · · · · · · · · · · · · · · · · · ·	P 13000056893		
The enclosed Articles of Am	endment and fee are su	bmitted for filing.		
Please return all corresponde	ence concerning this ma	tter to the following:		
		ODILIA PEGUERO		
		Name of Contact Person	n	
		OP COMPANY		
		Firm/ Company		
		14331 SW 286 ST		
		Address	700000000000000000000000000000000000000	
	HOMESTEAD, FL 33033			
	c			
	ODILIA	APEGUERO@YAHOO.CO	DM .	
I		sed for future annual report		
For further information conc	erning this matter, pleas	se call:		
ODILIA I	PEGUERO	at (
Name of Con	tact Person	at () Area Code & Daytime Telephone Number		
Enclosed is a check for the f	ollowing amount made	payable to the Florida Depa	artment of State;	
S35 Filing Fee	3\$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 A			Address	
Amendme Division o	nt Section f Corporations		Iment Section	
P.O. Box (on of Corporations Building	
	e, FL 32314		Executive Center Circle	

Tallahassee, FL 32301

Articles of Amendment Articles of Incorporation of

OP CORP

(Name of Corporation as currently	filed with the	Florida Dept.	of State)
` 			

P130000)56893			
(Document Number of C	Corporation (if known)		····	
Pursuant to the provisions of section 607.1006, Florida Statutes, this Faits Articles of Incorporation:	lorida Profit Corporation adopts the foll	lowing ame	ndment	
A. If amending name, enter the new name of the corporation:		The		
name must be distinguishable and contain the word "corporation, "Corp.," "Inc.," or Co.," or the designation "Corp," "Inc," or "C word "chartered," "professional association," or the abbreviation "P	o". A professional corporation name i	the abbrevi	new iation in the	
B. Enter new principal office address, if applicable:	30392 OLD DIXIE HWY			
(Principal office address <u>MUST BE A STREET ADDRESS</u>)	HOMESTEAD, FL 33033		233	
		7 · · · · · · · · · · · · · · · · · · ·	55	
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)	30392 OLD DIXIE HWY	Grand Street Charles Then	12 #	
	HOMESTEAD, FL 33033		7	
		5,3		
D. If amending the registered agent and/or registered office address: Name of New Registered Agent Name of New Registered Agent	ss in Florida, enter the name of the			
(Florida stree	t address)			
New Registered Office Address:	, Florida			
(6	City)	(Zip Code)		
New Registered Agent's Signature, if changing Registered Agent: I hereby accept the appointment as registered agent. I am familiar wi	th and accept the obligations of the posi	tion.		
Si was at New Bu	victored Acoust if changing			

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	<u>V</u>	Mike Jones	
X Add	<u>sv</u>	Sally Smith	
Type of Action (Check One)	Title	Name	Address
1) Change	VP	JUAN ANDRES MOTA	14331 SW 286 ST
Add Remove			HOMESTEAD, FL 33033
2) Change			
Add			
Remove			
3) Change			
Add			
Remove			
4) Change			
Add			
Remove			
5) Change			
Add			
Remove			
6) Change			
Add			
Remove			

(Attach additio	r adding additional Artic nal sheets, if necessary),	(Be specific)	. <u></u>		
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·					
				<u> </u>	
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		W			
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			7.00		
provisions fo	ent provides for an exchange implementing the amen	ange, reclassification, or idment if not contained	or cancellation of issued in the amendment in	tself:	
(у пос ар	plicable, indicate N/A)				
-					
	-				
		· · · · · · · · · · · · · · · · · · ·			

• •	07/22/2016	
The date of each amendment(s) a	doption:	, if other than th
date this document was signed.		
Property and the second section is a	07/21/2016	
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 De	block does not meet the applicable statutory filing requirements, this date epartment of State's records.	will not be listed as th
Adoption of Amendment(s)	(<u>CHECK ONE</u>)	
☐ The amendment(s) was/were ad by the shareholders was/were so	opted by the shareholders. The number of votes cast for the amendment(s) ufficient for approval.	
	proved by the shareholders through voting groups. The following statement reach voting group entitled to vote separately on the amendment(s):	
"The number of votes cast	t for the amendment(s) was/were sufficient for approval	
by	(voting group)	
	(voting group)	
action was not required.	opted by the board of directors without shareholder action and shareholder opted by the incorporators without shareholder action and shareholder	
·	07/21/2016	
Dated	07/21/2010	
Signature	1/1/45	
(By a	director, president or other officer - if directors or officers have not been	
	ed, by an incorporator - if in the hands of a receiver, trustee, or other court	
арроіі	nted fiduciary by that fiduciary)	
	ODILIA PEGUERO	
	(Typed or printed name of person signing)	
	PRESIDENT	
	(Title of person signing)	