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.

(((H20000054582 3)))



H200000545823ABC-

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

To:	
	Divisi

Division of Corporations

Fax Number

: (850)617-6380

From:

Account Name : SICONT ENTERPRISES OF AMERICA INC

Account Number : I20160000041 Phone : (407)443-8973 Fax Number : (407)930-2626

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

Email Address:

## COR AMND/RESTATE/CORRECT OR O/D RESIGN LIS&OR CORP

19 77.10:5

Certificate of Status	0
Certified Copy	0
Page Count	06
Estimated Charge	\$35.00

Y SULKEP

FEB 2 0 2020

Electronic Filing Menu

Corporate Filing Menu

Help

(H200000545Z8Z 3)

TO: Amendment Section

## (H200000545282 3)

#### **COVER LETTER**

Division of Corp	porations		
NAME OF CORPO	RATION: LIS&OR CORP		
DOCUMENT NUM	D11000004800		
The enclosed Articles	of Amendment and fee are su	buitted for filing.	. •
Picase return all corre	espondence concerning this ma	atter to the following:	
	DESIREE TORRES		
	-	Name of Contact Person	ī
	SICONT ENTERPRISES OF	AMERICA INC	•
	· · · · · · · · · · · · · · · · · · ·	Firm/ Company	
	13574 VILLAGE PARK DR	STE 250	
		Address	····
	ORLANDO, FL 32837		
	.,	City/ State and Zip Cod	e e
	SICONT.SUNBIZ@HOTMA	AIL.COM	
		sed for future annual report	notification)
		•	·
For further information	on concerning this matter, pleas	sc call:	
DESIREE TORRES		at (407	) 443-8973 dc & Daytime Telephone Number
Name	of Contact Person	Arca Co	de & Daytime Telephone Number
Enclosed is a check fo	or the following amount made	payable to the Florida Dep	artment of State:
<b>\$</b> 35 Filing Fee	S43.75 Filing Fee & Certificate of Status	S43.75 Fiting Fcc & Certified Copy (Additional copy is enclosed)	S52.50 Filing Fee Certificate of Status Certified Copy (Additional Copy is enclosed)
	iling Address		Address ·
	endment Section islant Corporations		ment Section
	Box 6327		n of Corporations
	ahassee, FL 32314		V. Monroe Street, Suite 810
			ssee, FL 32303

(H201000545282 3)

# Articles of Amendment to Articles of Incorporation

(H200000545282 3)

LIS&OR CORP		
(Name	of Corporation as current	tiv filed with the Florida Dept. of State)
P13000094822		•
	(Document Number of	of Corporation (if known)
Pursuant to the provisions of section 607 its Articles of Incorporation:	.1006, Floride Statutes, this	Florida Profit Corporation adopts the following amendment(s) to
A. If amending name, enter the new n	ame of the corporation:	
		The new
name must be distinguishable and contain "Inc.," or Co.," or the designation "( "chartered." "professional association,"	Corp." "Inc," or "Ço"	"company," or "Incorporated" or the abbreviation "Corp.,"  A professional corporation name must contain the word "
B. Enter new principal office address, if applicable:		5152 CONROY RD #36
Principal office address MUST BE A S		ORLANDO, FL 32811
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)		5152 CONROY RD #36
		ORLANDO, FL 32811
D. If amending the registered agent m	nd/or registered office add	dress in Florida, enter the name of the
new registered agent and/or the ne		
Name of New Registered Agent	ORLANDO REGISTERE	ED AGENTS LLC
•	13574 VILLAGE PARK	
	(Florida st	treet address)
New Registered Office Address:	ORLANDO	Florida 32837
		(Zip Code)
		ó <sub>A</sub>
lew Registered Agent's Signature, if c	hanging Degistered Agent	••
hereby accept the appointment as regis	tered agent. I am familiar	with and accept the obligations of the position.
	<u> </u>	
•	Dain 1	5
	<del></del>	Registered Agent, if changing
Shook If and Hook le		
Theck if applicable  The amendment(s) is/are being filed p		(A) EC

(H2600005452823)

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 Directors being address of each Officer and/or Directors and/or Directors and/or Directors and/or Directors and/or Directors and/or Directors 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)

Example:

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 Doc 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 Janes, V as Remove, and Sally Smith, SV as an Add.

X Change	<u>PT</u> <u>Joh</u>	n Doe	
X Remove	Y <u>Mil</u>	ke Iones	
_X Add	<u>SV</u> <u>Sal</u>	ly Smith	
Type of Action (Check One)	<u>Title</u>	Name	Address
1) Change	P	ROMERO, VICTOR A	5152 CONROY RD. #36
Add	<del></del>		ORLANDO, FL 32811
X Remove			
2) X Change	P	SANCHEZ, LIGIA G	5152 CONROY RD. #36
<b>Ad</b> d			ORLANDO, FL 32811
Remove Change	VP, S	VALLENILLA, ELIZABETH	5152 CONROY RD. #36
X Add			ORLANDO, FL 32811
Remove			
4) Change			
Add			
Remove			
5) Change			
Add			
Rcmove			
6) Change			
Add			
Romovo			

(4200000545282 3)

	(H2000005452823)
C. If amending or adding additional Articles, enter change(s) here:  (Attach additional sheets, if necessary). (Be specific)	- -
	-
	· · · · · · · · · · · · · · · · · · ·
	/
	·
·	
<ul> <li>If an amendment provides for an exchange, reclassification, or cancellation of iss provisions for implementing the amendment if not contained in the amendment</li> </ul>	rued shares,
(If not applicable, indicate N/A)	A Providence of the Control of the C
	<del></del>
	<del></del>

(A20000545282 3)

	(H2000005452823
The date of each amendment(s) adoption:date this document was signed.	if other than the
Effective date if applicable:	· · · · · · · · · · · · · · · · · · ·
	(no more than 90 days after amendment file date)
Note: If the date inserted in this block does no document's effective date on the Department of	ot meet the applicable statutory filing requirements, this date will not be listed as the State's records.
Adoption of Amendment(s) (CH	IECK ONE)
The amendment(s) was/were adopted by the action was not required.	incorporators, or board of directors without shareholder action and shareholder
☐ The amendment(s) was/were adopted by the by the shareholders was/were sufficient for a	shareholders. The number of votes cast for the amendment(s) approval,
must be separately provided for each voting	e sharcholders through voting groups. The following statement group entitled to vote separately on the amendment(s):
"The number of votes cast for the amer	ndment(s) was/were sufficient for approval
by(voti	ing group)
02/18/2020 Dated	
Signature (By a director, presi selected, by an inco	ident or other officer – if directors or officers have not been appointer – if in the hands of a receiver, trustee, or other court
appointed fiduciary	by that fiduciary)
LIGIA G SA	ANCHEZ
	Typed or printed name of person signing)
PRESIDEN	т
	Title of person signing)

(H20110545282 3)



February 19, 2020

### FLORIDA DEPARTMENT OF STATE Division of Corporations

SICONT ENTERPRISES OF AMERICA

SUBJECT: LISAOR CORP REF: P13000094822

We received your electronically transmitted document. However, the document has not been filed. Please make the following corrections and refax the complete document, including the electronic filing cover sheet.

The registered agent must sign accepting the designation.

Please check the appropriate box on the amendment form regarding the adoption of the amendment(s).

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6050.

Terri J Schroeder Regulatory Specialist III FAX Aud. #: H20000054582 Letter Number: 020A00003651

P.O BOX 6327 - Tallahassee, Florida 32314