P14000000429

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		COTER LETTER -				
TO: Amendment Section Division of Corporations						
NAME OF CORPO	NAME OF CORPORATION: ELITEXPORT INC.					
DOCUMENT NUM	BER: P14000000429					
The enclosed Articles	of Amendment and fee are su	bmitted for filing.				
Please return all corre	espondence concerning this man	tter to the following:				
	ARTURO MARIN					
		Name of Contact Person	n			
	ELITEXPORT INC.					
		Firm/ Company				
	15703 WOODGATE PL					
	Address					
	SUNRISE, FL 33326					
		City/ State and Zip Cod	e			
elite	kport@gmail.com					
	E-mail address: (to be us	sed for future annual report	notification)			
For further information	on concerning this matter, pleas	se call:				
ARTURO MARIN		at (265-2697			
Name	of Contact Person	Area Co	de & Daytime Telephone Number			
Enclosed is a check for the following amount made payable to the Florida Department of State:						
\$35 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)			
Ma	Mailing Address Street Address					
	endment Section		Iment Section			
	ision of Corporations		on of Corporations			
	P.O. Box 6327 Clifton Building					
Tallahassee, FL 32314		2661 Executive Center Circle				

Tallahassee, FL 32301

Articles of Amendment to Articles of Incorporation of

ELITEXPORT INC.			
(<u>Name</u> P1400000429	of Corporation as curre	ntly filed with the Florida Dept. of S	<u>State</u>)
	(Document Number	of Corporation (if known)	
Pursuant to the provisions of section 607 its Articles of Incorporation:		•	the following amendment(s) to
A. If amending name, enter the new n ELITEXPORT INC.	ame of the corporation:		
name must be distinguishable and cor "Corp.," "Inc.," or Co.," or the design word "chartered," "professional associa	nation "Corp," "Inc," or	"Co". A professional corporation	The new I'' or the abbreviation name must contain the
B. Enter new principal office address, if applicable:		15703 WOODGATE PL	a ar
(Principal office address <u>MUST BE A S</u>		SUNRISE	
		FL 33326	2
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)		15703 WOODGATE PL	<u> </u>
		SUNRISE	7:0
		FL 33326	
D. If amending the registered agent an new registered agent and/or the ne			<u>the</u>
Name of New Registered Agent	ARTURO MARIN		
	15703 WOODGATE PL	•	
	(Florida	street address)	
New Registered Office Address: SUNRISE		, Flor	
		(City)	(Zip Code)
New Registered Agent's Signature, if c I hereby accept the appointment as regis			ne position.
	Munfi	<u></u>	
	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 Do	<u>oe</u>	
X Remove	<u>v</u>	Mike Jo	ones	
X Add	<u>sv</u>	Sally Sr	<u>nith</u>	
Type of Action (Check One)	<u>Title</u>		<u>Name</u>	Address
I) X Change	PT		ARTURO MARIN	15703 WOODGATE PL
Add				SUNRISE
Remove				FL, 33326
2) Change	 -			
Add				
Remove				
3) Change		_		
Add				
Remove				
4) Change		_		
Add				
Remove				
5) Change		_		
Remove				
6) Change				
Add				
Remove				

	rticles, enter change . (Be specific)			
				 -

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				· · ·
				_
	<u></u>		_	
an amendment provides for an exp provisions for implementing the am	endment if not cont	ion, or cancellation o ained in the amendm	f issued shares, ent itself:	
(if not applicable, indicate N/A)				
(if not applicable, indicate N/A)				
(if not applicable, indicate N/A)				
(if not applicable, indicate N/A)				
(if not applicable, indicate N/A)				

* · · · · · · · · · · · · · · · · · · ·	07-15-2019	, if other than the
The date of each amendment(s) add	ption:	
date this document was signed.		
	-2019	
Effective date if applicable:	(no more than 90 days after amendn	ent file date)
Note: If the date inserted in this bl document's effective date on the Dep	ock does not meet the applicable statutory filing partment of State's records.	requirements, this date will not be listed as the
Adoption of Amendment(s)	(<u>CHECK ONE</u>)	
by the shareholders was/were su	pted by the shareholders. The number of votes ca	
must be separately provided for	roved by the shareholders through voting groups. each voting group entitled to vote separately on	
"The number of votes cast	for the amendment(s) was/were sufficient for app	roval
1		
by	(voting group)	
action was not required.	opted by the board of directors without sharehold	
The amendment(s) was/were ad action was not required.	opted by the incorporators without shareholder ac	tion and shareholder
07-15-201 Dated		
,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	Characters of directors of	
setec	director, president or other officer – if directors of ed, by an incorporator – if in the hands of a receinted fiduciary by that fiduciary)	r officers have not been ver, trustee, or other court
	ARTURO MARIN	
	(Typed or printed name of person si	gning)
	PRESIDENT	
	(Title of person signing)

J