P14000040959

(Requestor's Name)
(Address)
(Address)
(City/State/Zip/Phone #)
PICK-UP WAIT MAIL
(Business Entity Name)
(Document Number)
Certified Copies Certificates of Status
Special Instructions to Filing Officer:

Office Use Only



300316978623

08/17/18--01005--001 **35.00



C. GOLDEN AUG 2 0 2019

COVER LETTER

TO: Amendment Section Division of Corporations

NAME OF CORPORATION:FJB 6501, INC					
DOCUMENT NUMBER:					
The enclosed Articles of Amendment and fee are s	submitted for filing.				
Please return all correspondence concerning this m	atter to the following:				
EGLIANA GOMEZ					
WD BUSINESS CONSULT	Name of Contact Person FANTS	1			
1555 BONAVENTURE BL	Firm/ Company 1555 BONAVENTURE BLVD SUITE 1020				
WESTON, FL33326	Address WESTON, FL33326				
 	City/ State and Zip Code	3			
	ised for future annual report	notification)			
For further information concerning this matter, plea EGLIANA GOMEZ	954 at (4532295			
Name of Contact Person		de & Daytime Telephone Number			
Enclosed is a check for the following amount made	payable to the Florida Depa	rtment of State;			
■ \$35 Filing Fee □\$43.75 Filing Fee & Certificate of Status	□\$43.75 Filing Fee & Centified Copy (Additional copy is enclosed)	☐\$52,50 Filing Fee Certificate of Status Certified Copy (Additional Copy is enclosed)			
Mailing Address Amendment Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314	Amend Divisio Clifton	Address ment Section n of Corporations Building xecutive Center Circle			

Tallahassee, FL 32301

Articles of Amendment Articles of Incorporation

	Articles of ,	Amendment	^
	· · · · · · · · · · · · · · · · · · ·	o ncorporation	~ //
		ncorporation of	Olano A
FJB 6501, INC			Ser. 70617
(Name	of Corporation as curren	tly filed with the Florida Dept.	of State) AL/AD.
P14000040959			- AHASOF
	(Document Number	of Corporation (if known)	Of State) ALLAHASSEE
Pursuant to the provisions of section 607 its Articles of Incorporation:	1006, Florida Statutes, this	s Florida Profit Corporation add	
A. If amending name, enter the new na	ame of the corporation:		
			The new
name must be distinguishable and con "Corp.," "Inc.," or Co.," or the desigr word "chartered," "professional associa	nation "Corp," "Inc," or	"Co". A professional corporat "P.A."	ion name must contain the
B. Enter new principal office address,	if applicable:	16350 SW 68TH TERRAC	E
Principal office address MUST BE A STREET ADDRESS)		MIAMI, FL 33193	
C. Enter new mailing address, if appl	icable:	16350 SW 68TH TERRACI	
(Mailing address MAY BE A POST			
		MIAMI, FL 33193	
D. If amending the registered agent are			e of the
new registered agent and/or the new registered office ad FRANCISCO BLAS			
Name of New Registered Agent			
Name of New Registered Agent	16350 SW 68TH TERRA	ACE	
Name of New Registered Agent			· · · · · · · · · · · · · · · · · · ·
		street address)	33193
Name of New Registered Agent New Registered Office Address:	(Florida s	street address)	33193 Florida(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 <math>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)	<u>Title</u>	<u>Name</u>	Address		
	S	EDUARDO E. AGUIRRE	16350 SW 68TH TERRACE		
1) Change X Add			MIAMI, FL 33193		
Remove					
2) Change					
Add					
Remove					
3) Change		-			
Add					
Remove					
4) Change		/			
Add					
Remove					
5) Change					
Add					
Remove			<u> </u>		
6) Change					
Add		,			
Remove					

ach additional sheets, if necessary). (Be sp	ecific)
	•
-	
	
	/
/	,
/	
•	
, , , , , , , , , , , , , , , , , , , ,	
	n
<u>i amendment provides for an exchange, re</u>	classification, or cancellation of issued shares,
	if not contained in the amendment itself:
ovisions for implementing the amendment	
(if not applicable, indicate N/A)	

The date of each amendment(s) adoption:	, if other than the
date this document was signed.	
Effective date if applicable:	
Effective date <u>if applicable</u> : (no more than 90 days after amendment file d	ate)
Note: If the date inserted in this block does not meet the applicable statutory filing requiren document's effective date on the Department of State's records.	nents, this date will not be listed as the
Adoption of Amendment(s) (<u>CHECK ONE</u>)	
☐ The amendment(s) was/were adopted by the shareholders. The number of votes cast for the by the shareholders was/were sufficient for approval.	amendment(s)
☐ The amendment(s) was/were approved by the shareholders through voting groups. The follow must be separately provided for each voting group entitled to vote separately on the amend.	
"The number of votes east for the amendment(s) was/were sufficient for approval	
by	
☐ The amendment(s) was/were adopted by the board of directors without shareholder action an action was not required.	d shareholder
The amendment(s) was/were adopted by the incorporators without shareholder action and shareholder was not required.	archolder
Dated	
Signature To Cen ais a Blascia. (By a director president or other officer is director or officer be	
(By a director, president or other officer – if directors or officers has selected, by an incorporator – if in the hands of a receiver, trustee, appointed fiduciary by that fiduciary)	
FRANCISCO BLASINI	
(Typed or printed name of person signing)	
PRESIDENT	
(Title of person signing)	