P1400058212

(Re	questor's Name)	
(Ad	dress)	
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COVER LETTER

TO: Amendment Section Division of Corporations

NAME OF CORPORATION: Aluces of	Corporation
DOCUMENT NUMBER: P140000582	
The enclosed Articles of Amendment and	fee are submitted for filing.
Please return all correspondence concerni	ng this matter to the following:
Luis A. Silva	
	Name of Contact Person
Aluces Corporatio	n .
	Firm/ Company
14750 SW 26 Stre	et, Suite 204
	Address
Miami, Florida, 33	185
	City/ State and Zip Code
lsilva@alucescorp.com	
	s: (to be used for future annual report notification)
_ ······	(
For further information concerning this m	atter, please call:
Luis Silva	at () 505-8665
Name of Contact Person	Area Code & Daytime Telephone Number
Enclosed is a check for the following amo	ount made payable to the Florida Department of State:
□ \$35 Filing Fee □\$43.75 Filing Certificate of	<u>-</u>
Mailing Address Amendment Section Division of Corporation P.O. Box 6327 Tallahassee, FL 32314	Street Address Amendment Section Division of Corporations Clifton Building 2661 Executive Center Circle Tallahassee, FL 32301

Articles of Amendment to Articles of Incorporation of

(Nama (of Corneration as ourrer	tly filed with the Florida Dept.	of State)
14000058212	or Corporation as curren	my med with the Piorida Dept.	or state)
	(Document Number	of Corporation (if known)	
ursuant to the provisions of section 607. s Articles of Incorporation:	1006, Florida Statutes, thi	s Florida Profit Corporation add	opts the following amendment(s)
. If amending name, enter the new na	ime of the corporation:		
			The new
ame must be distinguishable and con Corp.," "Inc.," or Co.," or the design ord "chartered," "professional associa	ation "Corp," "Inc," or	"Co". A professional corporate	
. Enter new principal office address,	if annlicable:	14750 SW 26th Street	
Principal office address <u>MUST BE A S</u>		Suite 204	
		Miami, Florida 33185	
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)		14750 SW 26th Street	
		Suite 204	
		Miami, Florida 33185	in w
. If amending the registered agent an new registered agent and/or the nev			of the
Name of New Registered Agent	Luis A. Silva		
	14750 SW 26th Street, S	luite 204	
		street address)	
	(Florida s	areer adaress)	
New Registered Office Address:	(Florida s	•	Florida

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	<u>ones</u>	
X Add	<u>sv</u>	Sally Sr	<u>nith</u>	
Type of Action (Check One)	Title		Name	<u>Addres</u> s
1) Change	VP	_	David O. Borges	11439 SW 5th Street
X Add				Miami, Florida 33174
Remove				
2) Change		_		
Add				
Remove				
3) Change		_		
Add				
Remove				
4) Change			- And the second state of	
Add				
Remove				
5) Change				
Add		_		
Remove				
Kemuve				
6) Change		_		
Add				
Remove				

Attach additional:	ding additional Ausheets, if necessary)	. (Be specific)				
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provisions for im	provides for an exposite provides for an exposite and able, indicate N/A)	change, reclassif nendment if not c	cation, or cancella ontained in the an	ation of issued she nendment itself:	ares.	
<u> </u>	<u> </u>					
		<u> </u>				
			.			

The date of each amendment(s) a date this document was signed.	doption:	, if other than the
Effective date if applicable:		
Enective date in applicable.	(no more than 90 days after amendment file date)	
Note: If the date inserted in this document's effective date on the D	block does not meet the applicable statutory filing requirements, this date will repartment of State's records.	ot be listed as the
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	for the amendment(s) was/were sufficient for approval	
by		
•	(voting group)	
☐ The amendment(s) was/were ad action was not required.	opted by the board of directors without shareholder action and shareholder	
☐ The amendment(s) was/were ad action was not required.	opted by the incorporators without shareholder action and shareholder	
July 12th, Dated		
selecte	director, subsident 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 inted fiduciary by that fiduciary)	-
	Luis A. Silva	
	(Typed or printed name of person signing)	
	President	
	(Title of person signing)	