P14000067951

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COVER LETTER

TO: Amendment Section Division of Corporations

NAME OF CORPO	RATION: JOMADA SERVI	CES CORP	
DOCUMENT NUM	BER: P14000067951		
The enclosed Articles	of Amendment and fee are su	bmitted for filing.	
Please return all corre	spondence concerning this ma	tter to the following:	
	JOSE MANUEL DE ARMA	AS	
		Name of Contact Person	n
	JOMADA SERVICES COF		
		Firm/ Company	
	11800 SW 187 STREET	, ,	
		Address	
	MIAMI, FL 33177		
		City/ State and Zip Code	e
DAK	OTATAX@GMAIL.COM		
	E-mail address: (to be us	sed for future annual report	notification)
For further information	on concerning this matter, pleas	786	326 7314
Name	of Contact Person	at (Area Co) de & Daytime Telephone Number
	or the following amount made		
S35 Filing Fee	□\$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 Address Amendment Section Division of Corporations 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

to

JOMADA SERVICES CORP

(N) 6C	d Cl I Mad Dr. M. N. a. Co. a.)
	on as currently filed with the Florida Dept. of State)
P1400067951	
(Docum	nent Number of Corporation (if known)
Pursuant to the provisions of section 607.1006, Florida its Articles of Incorporation:	a Statutes, this Florida Profit Corporation adopts the following amendment(s
A. If amending name, enter the new name of the co	orporation:
	The new d "corporation." "company," or "incorporated" or the abbreviation ," "Inc," or "Co". A professional corporation name must contain the abbreviation "P.A."
B. Enter new principal office address, if applicable	<u> </u>
(Principal office address MUST BE A STREET ADD	
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BO.	<u> </u>
D. <u>If amending the registered agent and/or register</u> new registered agent and/or the new registered of	
new registered agent and/or the new registered to	once address.
Name of New Registered Agent	
	(Florida street address)
New Registered Office Address:	
	(City) (Zip Code)
New Registered Agent's Signature, if changing Regi	
t nereby accept the appointment as registered agent.	I am familiar with and accept the obligations of the position.
Signo	ature 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)	<u>Title</u>	Name	<u>Addres</u> s
1) Change	MGR	OSCAR SANTANA-BOSQUE	11800 SW 187 ST
Add	· · · · · ·		MIAMI, FL 33177
X Remove			
2) Change			
Add			
Remove			
3) Change			
Add			
Remove			
4) Change		_	
Add			
Remove			
5) Change			
Add			
Remove			
6) Change	_	_	_
Add			
Remove			-

	ng additional Articets, if necessary).	(Be specific)			
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for amondment ar	ovides for an exch	nange, reclassifica	tion, or cancellat	ion of issued sha	res,
an amenument pr	ementing the ame	nament it not con	tained in the ame	endment itself:	
provisions for impl	(e. indicate N/A)				
provisions for impl (if not applicab	le, indicate N/A)				
provisions for impl	le, indicate N/A)				_
provisions for impl	(e, indicate NA)				_
provisions for impl	(e, indicate N/A)				
provisions for impl	(e, indicate N/A)				
provisions for impl	(e, indicate N/A)				
provisions for impl	(e, indicate N/A)				
provisions for impl	(e, indicate N/A)				
provisions for impl	(e, indicate N/A)				
provisions for impl	(e, indicate N/A)				

	JULY 23, 2018	
The date of each amendment(s) :	doption:	, if other than the
date this document was signed.	LV 22, 2040	
Effective date <u>if appli</u> cable:	LY 23, 2018	
	(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 epartment of State's records.	this date will not be listed as the
Adoption of Amendment(s)	(<u>CHECK ONE</u>)	
The amendment(s) was/were ad by the shareholders was/were s	opted by the shareholders. The number of votes east for the amer ufficient for approval.	ndment(s)
	proved by the shareholders through voting groups. The following reach voting group entitled to vote separately on the amendment	
"The number of votes cas	t for the amendment(s) was/were sufficient for approval	
by	(voting group)	
	(voting group)	
☐ The amendment(s) was/were ad action was not required.	opted by the board of directors without shareholder action and sh	areholder
☐ The amendment(s) was/were ad action was not required.	opted by the incorporators without shareholder action and shareh	older
07/23/20	18	
Dated	<u> </u>	
j	Van AA	
Signature		
	arcenor, president or other officer – if directors or officers have need, by an incorporator – if in the hands of a receiver, trustee, or ot	
	nted fiduciary by that fiduciary)	ner court
	JOSE MANUEL DE ARMAS	
	(Typed or printed name of person signing)	
	PRESIDENT	
	(Title of person signing)	