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COVER LETTER

TO: Amendment Section Division of Corporations

NAME OF CORPORA	MON: Alejonaka	a Pasarell, P.A.,	<u> </u>
DOCUMENT NUMBER	2: <u>P14000074</u> 0	037	
The enclosed Articles of A	Amendment and fee are su	bmitted for filing.	
Please return all correspo	ndence concerning this ma	tter to the following:	
	色	mily J. Phillips	
		Name of Contact Pers	on
	Pni	llips Lanter PLLC	
		Firm/ Company	
	2 South Bi	scource blud #2	300
		Address	
	Miami	HO10G 33131	
		City/ State and Zip Co	de
	eonillia	os@phillipslanler.	(ram
	E-mail address: (to be us	ed for future annual repo	rt notification)
	oncerning this matter, pleas) 350-5299
Name of C	ontact Person		ode & Daytime Telephone Number
Enclosed is a check for the	e following amount made p	payable to the Florida De	partment of State:
S35 Filing Fee	☐\$43.75 Filing Fee & Certificate of Status	S43.75 Filing Fee & Certified Copy (Additional copy is enclosed)	□\$52.50 Filing Fee Certificate of Status Certified Copy (Additional Copy is enclosed)
Amendr Divisior P.O. Bo	Address ment Section of Corporations x 6327 see, FL 32314	Amer Divis The 0 2415	t Address adment Section ion of Corporations Centre of Tallahassee N. Monroe Street, Suite 810 passee, FL 32303

Articles of Amendment to Articles of Incorporation

Alexandra Pascirell	-1	
(Name of Corporation as curr	ently filed with the Florida De	ept. of State)
P14 0000 74 03	37	
(Document Numb	er of Corporation (if known)	
Pursuant to the provisions of section 607.1006, Florida Statutes, t its Articles of Incorporation:	this Florida Profit Corporation	adopts the following amendmen
A. If amending name, enter the new name of the corporation	<u>:</u>	
		The new
name must be distinguishable and contain the word "corporation, "Inc.," or Co.," or the designation "Corp," "Inc," or "Co" "chartered," "professional association," or the abbreviation "P.	. A professional corporation	l" or the abbreviation "Corp.," name must contain the word
B. Enter new principal office address, if applicable:		29
(Principal office address <u>MUST BE A STREET ADDRESS</u>)		721
		
		1
C. Enter new mailing address, if applicable:		- TO
(Mailing address <u>MAY BE A POST OFFICE BOX</u>)		
		· · · · · · · · · · · · · · · · · · ·
D. If amending the registered agent and/or registered office a new registered agent and/or the new registered office addr	iddress in Florida, enter the na	ame of the
Name of New Registered Agent		
Name of New Registered Agent		
	·	
(Florida	a street address)	
New Registered Office Address:		, Florida
	(City)	(Zip Code)
New Registered Agent's Signature, if changing Registered Agent	ent:	
I hereby accept the appointment as registered agent. I am familia	ar with and accept the obligation	ns of the position.
Signature of Nev	v Registered Agent, if changing	
Check if applicable		
☐ The amendment(s) is/are being filed pursuant to s. 607.0120 (1	1) (e), F.S.	

If amending the Officers and/or Directors, enter the title and name of each officer/director being removed and title, name, 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 = C Executive Officer; CFO = Chief Financial Officer. If an officer/director holds more than one title, list the first letter of each office he 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. Their 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 Characteristic of the State of State of

X Change	<u>PT</u>	John Doc	
X Remove	\underline{V}	Mike Jones	
X Add	<u>sv</u>	Sally Smith	
Type of Action (Check One)	<u>Title</u>	<u>Name</u>	Address
1) Change	PT	Alejandra Pasarell, as	151 Crandon blvd #102
<u></u> ✓ Add		trustee of the Algandry Pasorell Revocable Trust	key biscounc, FL 33140
Remove		dated August 31, 2021	
2) Change		Alejanda Pasarell	151 Orondon Blud #102
Add			key bisocrune, FL 33149
X Remove 3) Change			
Add			
Remove			
4) Change			
Add			
Remove			
5) Change			
Add			
Remove			
6) Change			
Add			
Remove			

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provisions for	implementing the	e amendment if no	sification, or cancel ot contained in the a	mendment itsel	snares, f <u>:</u>	
(if not ann	licable, indicate N	7A)				
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The date of each amendment(s) adoption:	, if other than
date this document was signed.	
Effective date if applicable:	· · · · · · · · · · · · · · · · · · ·
(no more than 90 days after amendment file date)	
Note: If the date inserted in this block does not meet the applicable statutory filing requirements, the document's effective date on the Department of State's records.	is date will not be listed as
Adoption of Amendment(s) (<u>CHECK ONE</u>)	
The amendment(s) was/were adopted by the incorporators, or board of directors without shareholder action was not required.	action and shareholder
The amendment(s) was/were adopted by the shareholders. The number of votes east for the amenda by the shareholders was/were sufficient for approval.	nent(s)
☐ The amendment(s) was/were approved by the shareholders through voting groups. The following standard to separately provided for each 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"	
by	
Dated August 31, 2021 Signature	
(By a director, president or other officer – if directors or officers have not be selected by an incorporator – if in the hands of a receiver, trustee, or other	
appointed fiduciary by that fiduciary) (Typed or printed name of person signing)	ell
X Pesident (Title of person signing)	