P14000076876

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COVER LETTER

TO: Amendment Section Division of Corporations

NAME OF CORPO	RATION: MILENIUM COR	P		
DOCUMENT NUM	P14000076876			
The enclosed Articles	of Amendment and fee are su	bmitted for filing.		
Please return all corre	spondence concerning this ma	tter to the following:		
	ALCALIRA JIMENEZ			
		Name of Contact Person	n	
	MILENIUM CORP	Firm/ Company		
	8200 NW 41ST ST SUITE 2	00		
		Address		
	DORAL, FL 33166			
		City/ State and Zip Cod	e	
	ALCALIRA7@HOTMAIL.0	СОМ		
	E-mail address: (to be us	sed for future annual report	notification)	
For further informatio	n concerning this matter, pleas	se call:at (832-0994	
Name of Contact Person			de & Daytime Telephone Number	
Enclosed is a check fo	r the following amount made	payable to the Florida Depa	artment of State:	
■ \$35 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			Address	
Amendment Section Division of Corporations		Amendment Section Division of Corporations		
P.O. Box 6327		The Centre of Tallahassee		
Tallahassee, FL 32314		2415 N. Monroe Street, Suite 810 Tallahassee, FL 32303		

Articles of Amendment to Articles of Incorporation of

MILENIUM CORP		
(Name of Corporation as curren	ttly filed with the Florida Dept. of State)	
P14000076876		
(Document Number	of Corporation (if known)	
Pursuant to the provisions of section 607.1006, Florida Statutes, thi its Articles of Incorporation:	s Florida Profit Corporation adopts the following amendment(s) to	
A. If amending name, enter the new name of the corporation:		
	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.	A professional corporation name must contain the word	
B. Enter new principal office address, if applicable:	<u> </u>	
(Principal office address <u>MUST BE A STREET ADDRESS</u>)	8200 NW 41ST ST SUITE 200	
	DORAL. FL 33166	
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)	6864 NW 109TH AVE	
	DORAL FL 33178	
	•	
D. If amending the registered agent and/or registered office ad- new registered agent and/or the new registered office address		
Name of New Registered Agent		
(Ellewisher	treet address)	
(Fibrial S	treet duaressy	
New Registered Office Address:	(City), Florida(Zip Code)	
	(City) (Zip Code)	
New Registered Agent's Signature, if changing Registered/Agen	nt;	
I hereby accept the appointment as registered agent. I am familiar		
Signature of New	Registered Agent, if changing	

Check if applicable

☐ The amendment(s) is/are being filed pursuant to s. 607.0120 (11) (e), F.S.

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>	Salty Smith	
Type of Action (Check One)	<u>Title</u>	Name	<u>Addres</u> s
1) Change	MGR	FREDDY N RODRIGUEZ PIMENT	6864 NW 109TH TH AVE
X Add			DORAL, FL 33178
Remove			
2) Change	AMBR	LUIS RODRIGUEZ	6864 NW 109TH TH AVE
X Add			DORAL, FL 33178
Remove 3) Change			
Add			<u> </u>
Remove			1
4) Change			
Add			·
Remove			
5) Change			
Add			
Remove			
6) Change			
Add			
Remove			

If amending or adding additional Art (Attach additional sheets, if necessary).	(Be specific)	
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		-
If an amendment provides for an excl	hange, reclassification, or cancellation of issued shares,	
provisions for implementing the ame	endment if not contained in the amendment itself:	
(if not applicable, indicate N/A)		:

•

2/28/24, 9:54 AM

The date of each amendment(s) adoption:, if other than the
date this document was signed.
02/28/2024 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, this date will not be listed as the document's effective date on the Department of State's records.
Adoption of Amendment(s) (CHECK ONE)
■ The amendment(s) was/were adopted by the incorporators, or board of directors without shareholder action and shareholder action was not required.
☐ The amendment(s) was/were adopted by the shareholders. The number of votes cast for the amendment(s) by the shareholders was/were sufficient for approval.
☐ The amendment(s) was/were approved by the shareholders through voting groups. The following statement must be 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
ALCALIRA JIMENEZ
Uy
(voting group)
Dated
Signature
(By a director president or other officer – if directors or officers have not been
selected, by an incorporator – if in the hands of a receiver, trustee, or other court
appointed fiduciary by that fiduciary)
ALCALIRA JIMENEZ
(Typed or printed name of person signing)
PRESIDENT
(Title of person signing)