P14 0000 87094

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03/30/21--01014--012 **35.00





COVER LETTER

TO: Amendment Section Division of Corporations

NAME OF CORPORATION: _____

DOCUMENT NUMBER: P14000087094

The enclosed Articles of Amendment and fee are submitted for filing.

Please return all correspondence concerning this matter to the following:

SANDRA DI CATALDO

Name of Contact Person

ALESSA CORP

Firm/ Company

1900 KEYSTONE BLVD

Address

NORTH MIAME FL 33181

City/ State and Zip Code

sandradicataldo@gmail.com

E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

 SANDRA DI CATALDO
 at (786)
 606-4415

 Name of Contact Person
 Area Code & Daytime Telephone Number

Enclosed is a check for the following amount made payable to the Florida Department of State:

🔳 835 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)

<u>Mailing Address</u> Amendment Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314 <u>Street Address</u> Amendment Section Division of Corporations The Centre of Tallahassee 2415 N. Monroe Street, Suite 810 Tallahassee, FL 32303

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Articles of Amendment to Articles of Incorporation of

	of	1721 C 1725 C 1
ALESSA CORP		F LED
(Name of Corporatio	on as currently filed with the F	lorida Dept. of State)
P14000087094		2021 SEP 30 AH 11: 12
(Docum	ient Number of Corporation (if k	nown)
Pursuant to the provisions of section 607,1006, Florida its Articles of Incorporation:	Statutes, this Florida Profit Con	<i>poration</i> adopts the following amendment(s)
A. If amending name, enter the new name of the co	rporation:	
N A		The
name must be distinguishable and contain the word "co "Inc.," or Co.," or the designation "Corp." "Inc.," "chartered." "professional association," or the abbrev	' or "Co". A professional con	orporated" or the abbreviation "Corp.,"
B. <u>Enter new principal office address, if applicable:</u> (Principal office address MUST BE A STREET ADD		
C. <u>Enter new mailing address, if applicable:</u> (Mailing address <u>MAY BE A POST OFFICE BO2</u>	<u>N/A</u>	
D. <u>If amending the registered agent and/or register</u> new registered agent and/or the new registered o <u>N/A</u> <u>Name of New Registered Agent</u>		iter the name of the
	(Florida street address)	
		. Florida
New Registered Office Address:	(City)	(Zip Code)

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 = ChiefExecutive 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 Doc 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 Cb

Example: <u>X</u> Change	<u>[7]</u>	<u>John Doe</u>	
X Remove	\underline{V}	Mike Jones	
<u> X</u> Add	<u>SV</u>	Sally Smith	
Type of Action (Check One)	<u>Title</u>	<u>Name</u>	Address
L) Change	VP	MIGUEL DEICH	1900 KEYSTONE BLVD
Add			NORTH MIAMI, FL 33181
X Remove			
2) Change			
Add			
Remove 3) Change			
Add			
Remove			
4) Change			
Add			
Remove			
Si Change			
Add			
Remove			
6) Change	. <u></u>		
Add			
Remove			

	g additional Articles, enter change(s) here: ts, if necessary). (Be specific)
A	
<u> </u>	
·····	
···· _ ,	
If an amondment near	ides for an exchange, reclassification, or cancellation of issued shares,
provisions for implen	nenting the amendment if not contained in the amendment itself:
(if not applicable	
US AMENDMENT PRO	OVIDES FOR A RECLASSIFICATION OF ALL ISSUED SHARES AS FOLLOWS:
NDRA DE CATALDO	PRESIDENT 100 @ \$1.00 SHARES OWNERSHIP: 100 %

09/23/2021
The date of each amendment(s) adoption:

_____, if other than the

Effective date if applicable:

the more than 90 days after amendment file dates

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 jollowing 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

by	
	(voting group)
	Daved 09/23/2021 Signature factor fibertaeth
	(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)
	SANDRA C DI CATALDO
	(Typed or printed name of person signing)

PRESIDENT

(Title of person signing)