Division of Corporations Electronic Filing Cover Sheet

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To:

Division of Corporations

Fax Number

: (850)617-6380

From:

Account Name : LAMADRID FINANCIAL SERVICES CORP

Account Number : I20200000059
Phone : (954)727-9771
Fax Number : (954)727-9773

\*\*Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please.\*\*

Email Address: dionolo lomodno inomio com

122 OCT 31 PH 2: 39

#### COR AMND/RESTATE/CORRECT OR O/D RESIGN CHESPI I PB INC

Certificate of Status	1
Certified Copy	0
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Electronic Filing Menu

Corporate Filing Menu

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11/1/2022

## <H 220003718573>

#### **COVER LETTER**

TO: Amendment Secti Division of Corpo			
NAME OF CORPOR	ATION: CHESPI I PB INC		
DOCUMENT NUMB	ER: P14000092749		<del></del>
	of Amendment and fee are sub	mitted for filing.	
Please return all corres	pondence concerning this mat	ter to the following:	
	JOSE SAKAL EMBOZ		
		Name of Contact Person	
	CHESPI I PB INC		
		Firm/ Company	
	7205 NW 102 PL		
		Address	
	DORAL, FL 33178		
		City/ State and Zip Code	:
	jorgesakal7@gmail.con		
	E-mail address: (to be us	ed for future annual report	notification)
For further information	n concerning this matter, pleas	se call:	
JOSE SAKAL EMBO	)Z	at (305	
Name	of Contact Person	Area Co	de & Daytime Telephone Number
Enclosed is a check for	or the following amount made	payable to the Florida Depa	iriment of State:
■ \$35 Filing Fee	S43.75 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 The Centre of Tallahassee 2415 N. Monroe Street, Suite 810 Tallahassee, FL 32303	

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Articles of Amendment Articles of Incorporation

2022 COT 31 FT 12: 17

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CHESPI I PB INC			
(Name o	Corporation as current	ly filed with the Florida D	ept. of State)
P14000092749			
	(Document Number of	of Corporation (if known)	
Pursuant to the provisions of section 607.1 its Articles of Incorporation:	1006, Florida Statutes, this	Florida Profit Corporation	radopts the following amendment(s)
A. If amending name, enter the new na	me of the corporation:		
PASTORA I INC			The new
name must be distinguishable and contain "Inc.," or Co.," or the designation "C "chartered," "professional association,"	orp." "Inc," or "Co.	A projessional corporation	d"or the abbreviation "Corp"  name must contain the word
		N/A	
B. Enter new principal office address, if applicable: (Principal office address MUST BE A STREET ADDRESS)			
(Trancipal Office wanted to the first parties			
		_	
C. Enter new mailing address, if appli (Mailing address MAY BE A POST)	<u>icable:</u> OFFICE BQX)	N/A	
D. If amending the registered agent an new registered agent and/or the new	nd/or registered office ad w registered office addre	dress in Florida, enter the	name of the
	LAMADRID FINANCL	AL SERVICES CORP	
Name of New Registered Agent	1265 S PINE ISLAND R	D	
	(Florida 1	treei address)	<del></del>
	PLANTATION		, Florida 33324
New Registered Office Address:		(City)	(Zip Code)
New Registered Agent's Signature, if a l hereby accept the appointment as regis	tered agent. I am Jamilia	nt: r with and accept the obliga Registered Agent, if changi	
	A PIRHTHIE OF IAEM	Treparence reform h events.	·
Check if applicable			

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

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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:

SpanDSP Fax Header

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>e</u>	
X Remove	<u>v</u>	Mike Jor	<u>nes</u>	
X Add	<u>sy</u>	Sally Sm	n <u>ith</u>	
Type of Action (Check One)	<u>Title</u>		Name	Address
1) Change		_		
Add				
Remove				
2) Change		_		
Add				
Remove 3) Change		_		
Add				
Remove				
4) Change				
Add				
Remove				
5) Change		_		
Add				
Remove				
6) Change				
Add				
Remove				

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			<u>-</u>		
			<u> </u>		
	de measides for	an exchange, reclassific	cation, or cancellation	of issued shares,	
if an ame	nament provides for	he smendment it not C	ontained in the anien	unient asen.	
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•	10/31/2022	if other than the
The date of each amendment(s) ad	option:	II QUICE INMI INC
date this document was signed.	non	
Effective date <u>if applicable</u> :	72022	
Ellective date il applicable.	(no more than 90 days after amendment file date)	
Note: If the date inserted in this bl document's effective date on the De	ock does not meet the applicable statutory filing requirements, partment of State's records.	this date will not be listed as th
Adoption of Amendment(s)	(CHECK ONE)	
The amendment(s) was/were ado action was not required.	pted by the incorporators, or board of directors without sharehold	ler action and shareholder
☐ The amendment(s) was/were add by the shareholders was/were su	pted by the shareholders. The number of votes cast for the amen fficient for approval.	dment(s)
☐ The amendment(s) was/were app must be separately provided for	roved by the shareholders through voting groups. The following each voting group entitled to vote separately on the amendment(	statement s):
"The number of votes cast	for the amendment(s) was/were sufficient for approval	
by		
	(voting group)	
10/31/2022		
Dated		
Signature	Jonne Sokal Embor	
(By a d	irector, president or other officer - if directors or officers have no	ot been
selecte	d, by an incorporator - if in the hands of a receiver, trustee, or of	her court
appoin	ted fiduciary by that fiduciary)	
	JORGE SAKAL EMBOZ	
	(Typed or printed name of person signing)	
	PRESIDENT	
	(Title of person signing)	

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