P1500000 3000

(Requestor's Name)
(Address)
(Address)
(Addless)
(City/State/Zip/Phone #)
PICK-UP WAIT MAIL
(Business Entity Name)
, ,
(Document Number)
Certified Copies Certificates of Status
Special Instructions to Filing Officer:

Office Use Only



800378310988

12/27/21--01012--001 **35.00

021 DEC 27 PH 5: 09

JAN 0 3 2021 D CUSHING

COVER LETTER

TO: Amendment Section Division of Corporations

> P.O. Box 6327 Tallahassee, FL 32314

	מת כב					
NAME OF CORPORA	rion: VIII-EC	TAIR LK, 1	INC			
DOCUMENT NUMBER	R: 150000	03 000		-		
The enclosed Articles of .	Amendment and fee are su	bmitted for filing.				
Please return all correspo	ndence concerning this ma	tter to the following:				
	Fidel 1	A. Garcia				
_	,	A. Garcia Name of Contact Person	1			
			nC.			
	<u> </u>	Firm/ Company				
		E idlewild a				
		FUSH'S, FL 7	32726			
	. ,,,,,	City/ State and Zip Cod	32726			
	ĺ	Jaar 2006@ Y	ahou.com	ες: <u>-1</u> 65-	2021	
	E-mail address: (to be us	sed-for future annual report	notification)		엺	6772 5
				7. 1.	2	471.
For further information co	oncerning this matter, pleas	se call:	notification) 1 434 - 2316 de & Daytime Telephone Nu	25.50 0.70 0.70 0.70 0.70 0.70 0.70 0.70	7 P	; ;
Heiry	Garlia	at (352) 434-2316	rentu Mga	Ω. ⊒₹	781
Name of	Contact Person	Area Co	de & Daytime Telephone Nu	mber	Ö	
Enclosed is a check for th	e following amount made	payable to the Florida Depa	artment of State;	fit	9	
☑ \$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)			
·	2 Address		Address			
	ment Section n of Corporations	Amendment Section Division of Corporations				
P.O. Bo	•		entre of Tallahassee			

2415 N. Monroe Street, Suite 810

Tallahassee, FL 32303

Articles of Amendment Articles of Incorporation o!

(Name of Corporation as currently filed with the Florida Dept. of State) (Document Number of Corporation (if known)

	corporation:
name must be distinguishable and contain the word " "Inc.," or Co.," or the designation "Corp," "Inc "chartered," "professional association," or the abb	"corporation," "company," or "incorporated" or the abbreviation "C c," or "Co". A professional corporation name must contain the breviation "P.A."
B. Enter new principal office address, if applicab	ble:
Principal office address <u>MUST BE A STREET AL</u>	
O. P. A. W. Adda at Grandbakh	
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE B	BOX)
). If amending the registered agent and/or regist	tered office address in Florida, enter the name of the
new registered agent and/or the new registered	
	(Florida street address)
Name of New Registered Agent	(Florida street address)
Name of New Registered Agent	
Name of New Registered Agent	(Florida street address)
Name of New Registered Agent New Registered Office Address:	(Florida street address), Florida (City) (Zip Code)
Name of New Registered Agent New Registered Office Address: New Registered Agent's Signature, if changing Re	(Florida street address), Florida (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)

Example:

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.

X_Change	<u>PT</u> <u>Joh</u>	n Doe	
X Remove	<u>V</u> <u>Mil</u>	ke Jones	
X Add	<u>SV</u> <u>Sal</u>	ly Smith	
Type of Action (Check One)	Title	<u>Name</u>	<u>Addres</u> s
1) Change	<u></u>	Maricela Garcia	son e idieni id ave
Add			Fustis, FL 32726
Remove 2) Change	P	Fidel A. Garvia	507 e idlewild Ave
Add			CUSH'S 7L, 32724
Remove 3) Change			4
Add			
Remove			
4) Change			
Add			
Remove			
5) Change			
Add			
Remove			
6) Change			
Add			
Remove			

Attach additional sheets, if necessar	Articles, enter change(s) here: ary). (Be specific)
,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	
	1 2 2
	termination of the control of the co
an amendment provides for an e	exchange, reclassification, or cancellation of issued shares,
<u>provisions for implementing the a</u>	amendment if not contained in the amendment itself:
(if not applicable, indicate N/A	4)

The date of each amendment(s) adoption:	, if other than the
Effective date if applicable:	
(no mo	re than 90 days after amendment file date)
Note: If the date inserted in this block does not meet t document's effective date on the Department of State's r	he applicable statutory filing requirements, this date will not be listed as the ecords.
Adoption of Amendment(s) (CHECK O	<u>NE</u>)
The amendment(s) was/were adopted by the incorporaction was not required.	ators, or board of directors without shareholder action and shareholder
☐ The amendment(s) was/were adopted by the sharehold by the shareholders was/were sufficient for approval.	
☐ The amendment(s) was/were approved by the shareho must be separately provided for each voting group er	
"The number of votes cast for the amendment(s) was/were sufficient for approval
by	
(voting group	")
12/21/2021	
Dated 12/21/2021 Signature	
Signature /	
(By a director, president or o	ther officer – if directors or officers have not been – if in the hands of a receiver, trustee, or other court
appointed fiduciary by that i	
7:10	A Cocció
	r printed name of person signing)
,	VP (vice President) person signing)
(Title of p	erson signing)