3/27/2020   Division of Corporations

P1S000008851

Florida Department of State
Division of Corporations
Electronic Filing Cover Sheet

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To :

    Division of Corporations
    Fax Number   : (850)617-6380

From:

    Account Name   : LEGALINC CORPORATE SERVICES INC.
    Account Number : I20180000011
    Phone   : (844)386-0178
    Fax Number   : (214)317-4754

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

Email Address: _____

COR AMND/RESTATE/CORRECT OR O/D RESIGN
JOSE RAUL HURTADO CIPRIANI PA

Certificate of Status	0
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MAR 31 2020

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Articles of Amendment
to
Articles of Incorporation
of

JOSE RAUL HURTADO CIPRIANI PA
_____

(Name of Corporation as currently filed with the Florida Dept. of State)

P15000008851
_____

(Document Number of Corporation (if known))

Pursuant to the provisions of section 607.1006, Florida Statutes, this **Florida Profit Corporation** adopts the following amendment(s) to its Articles of Incorporation:

A. If amending name, enter the new name of the corporation:

_____*The new* _name must be distinguishable and contain the word "corporation," "company," or "incorporated" or the abbreviation "Corp.," "Inc.," or "Co.," or the designation "Corp," "Inc," or "Co". A professional corporation name must contain the word "chartered," "professional association," or the abbreviation "P.A."_

B. Enter new principal office address, if applicable:
(Principal office address **MUST BE A STREET ADDRESS**)

C. Enter new mailing address, if applicable:
(Mailing address **MAY BE A POST OFFICE BOX**)

D. If amending the registered agent and/or registered office address in Florida, enter the name of the new registered agent and/or the new registered office address:

Name of New Registered Agent	Jose Fernando Cipriani
	275 NE 18th Street, Apt. 2103
	(Florida street address)
New Registered Office Address:	Miami _____, Florida 33132
	(City) _____ _(Zip Code)_

New Registered Agent's Signature, if changing Registered Agent:
I hereby accept the appointment as registered agent. I am familiar with and accept the obligations of the position.

Jose Fernando Cipriani
_____
Signature of New Registered Agent, if changing

Check if applicable
☐ The amendment(s) is/are being filed pursuant to s. 607.0120 (11) (c), 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:

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	PT	John Doe
X Remove	V	Mike Jones
X Add	SV	Sally Smith

Type of Action (Check One)	Title	Name	Address
1) ____ Change **X** ___ Add ____ Remove	P/D	Jose Fernando Cipriani	275 NE 18th Street, Apt 2103 Miami, FL 33132
2) ____ Change ____ Add **X** ___ Remove	P/D	JOSE R HURTADO CIPRIANI	275 NE 18TH ST 2103 MIAMI, FL 33132
3) ____ Change ____ Add ____ Remove			
4) ____ Change ____ Add ____ Remove			
5) ____ Change ____ Add ____ Remove			
6) ____ Change ____ Add ____ Remove			

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TALLAHASSEE FLORIDA

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E. If amending or adding additional Articles, enter change(s) here:
   (Attach additional sheets, if necessary).   (Be specific)

_____

_____

_____

_____

_____

_____

_____

_____

_____

_____

_____

_____

_____

F. If an amendment provides for an exchange, reclassification, or cancellation of issued shares,
   provisions for implementing the amendment if not contained in the amendment itself:
   (if not applicable, indicate N/A)

_____

_____

_____

_____

_____

_____

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The date of each amendment(s) adoption: _____ , if other than the 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, 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

by _____ ."

(voting group)

Dated __3/26/2020_____

Signature __Jose Fernando Cipriani_____

(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)

__Jose Fernando Cipriani_____

(Typed or printed name of person signing)

__President_____

(Title of person signing)

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