P15000011778

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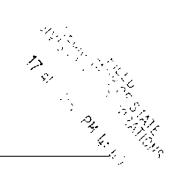
COVER LETTER

TO: Amendment Section Division of Corporations

NAME OF CORPORA	ATION: LOPEZ DISTRIBU	JNJ NOITE			
DOCUMENT NUMBE					
The enclosed Articles of	Amendment and fee are su	bmitted for filing.			
Please return all corresp	ondence concerning this ma	tter to the following:			
Α,	LEJANDRO PICHARDO				
_	, <u></u>	Name of Contact Persor	1		
Α	ACCOUNTING CENTER OF ORLANDO, LLC				
_	 	Firm/ Company			
1	706 E. SEMORAN BLVD !	STE#103			
_	· · · · · · · · · · · · · · · · · · ·	Address			
Α	POPKA, FL 32703				
_		City/ State and Zip Code	e		
anichar	do@accountingorl.com				
		sed for future annual report	notification)		
	concerning this matter, pleas		(71.73.16		
Alejandro Pichardo		at () 574-7340 de & Daytime Telephone Number		
Name of	Contact Person	Area Co	de & Daytime Telephone Number		
Enclosed is a check for t	he following amount made [payable to the Florida Depa	riment of State:		
S35 Filling Fee	□843.75 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)		
Ameno Divisio P,O, B	ng Address Iment Section on of Corporations ox 6327 assee, FL 32314	Amend Divisio Clifton 2661 E.	Address ment Section n of Corporations Building xecutive Center Circle ssec, F1, 32301		

17 MIN TO DW 1.1.7

Articles of Amendment to Articles of Incorporation of



LOPEZ DISTRIBUTION INC

(Name	of Corporation as currently	filed with the Florida De	pt. of State)
P15000011778			
· · · · · · · · · · · · · · · · · · ·	(Document Number of	Corporation (if known)	
Pursuant to the provisions of section 607. its Articles of Incorporation:	.1006, Florida Statutes, this F	lorida Profit Corporation	adopts the following amendment(s) to
A. If amending name, enter the new na	ame of the corporation:		
name must be distinguishable and con "Corp.," "Inc.," or Co.," or the design word "chartered," "professional associa	sation "Corp." "Inc." or "C	lo". A professional corpo	
B. Enter new principal office address,	if applicable:		
Principal office address <u>MUST BE A S</u>	TREET ADDRESS)		
C. Enter new mailing address, if appli (Mailing address MAY BE A POST)			
If amending the registered agent an new registered agent and/or the new registered agent ag		ss in Florida, enter the na	ame of the
Name of New Registered Agent			
	(Florala stree	t address)	
New Registered Office Address:	1706 E SEMORAND BLV		
<u> </u>	(Cny)		Zip Code)
New Registered Agent's Signature, if cl hereby accept the appointment as regist	hanging Registered Agent: ered agent. I am jamiliar wi	th and accept the obligatio	ns of the position.
-	Signature of New Re	gistered Agent, if changing	

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:

\underline{X} Change	<u>PT</u> <u>Jol</u>	n <u>i Doe</u>	
X Remove	<u>V</u> <u>Mi</u>	ke Jones	
X Add	<u>SV</u> <u>Sal</u>	ly Smith	
Type of Action (Check One)	Title	Name	<u>Addres</u> s
I) X Change	D	ESTEBAN LOPEZ	91 W MAIN ST
Add			APOPKA, FL 32703
Remove			
2) Change	P	MARIA LOPEZ PEREZ	429 KEE ST
X Add			APOPKA, FL 32703
Remove			
3.) Change			
Add			
Remove			
4) Change			
Add			
Remove			
5) Change			
Add			
Remove			
6) Change			
Add			
Remove			

	(Be specific)				
				, <u>.</u>	
<u> </u>		- <u></u>			
		· 			
					•
				-	
f an amendment provides for an exch	ange, reclassificat	ion, or cancellat	ion of issued sh	ares.	
f an amendment provides for an exch provisions for implementing the ame (if not applicable, indicate NA)	ange, reclassificat adment if not cont	ion, or cancellat ained in the am	ion of issued sh adment itself:	ares,	
provisions for implementing the amer	ange, reclassificat adment if not cont	ion, or cancellat ained in the am	ion of issued sheadment itself:	ares,	
provisions for implementing the amer	ange, reclassificat adment if not cont	ion, or cancellat ained in the ame	ion of issued sh ndment itself:	ares.	
provisions for implementing the amer	ange, reclassificat ndment if not cont	ion, or cancellat ained in the amo	ion of issued sh adment itself:	ares.	
provisions for implementing the amer	ange, reclassificat ndment if not cont	ion, or cancellat ained in the am	ion of issued sheadment itself:	ares.	
provisions for implementing the amer	ange, reclassificat adment if not cont	ion, or cancellat ained in the amo	ion of issued shendment itself:	ares.	
f an amendment provides for an exch provisions for implementing the ame (if not applicable, indicate N/A)	ange, reclassificat ndment if not cont	ion, or cancellat ained in the amo	ion of issued sheadment itself:	ares.	
provisions for implementing the amer	ange, reclassificat ndment if not cont	ion, or cancellat ained in the am	ion of issued sheadment itself:	ares.	
provisions for implementing the amer	ange, reclassificat adment if not cont	ion, or cancellat ained in the amo	ion of issued sh ndment itself:	ares.	

The date of each amendment(s) addate this document was signed.	eption:	, if other than the
Effective date <u>if applicable</u> :		
	ino more than 90 days after amendment file date)	
Note: If the date inserted in this blo document's effective date on the Dep	ock does not meet the applicable statutory filing requirements, this artment of State's records.	date will not be listed as the
Adoption of Amendment(s)	(<u>CHECK ONE</u>)	
■ The amendment(s) was/were adop by the shareholders was/were suff	ted by the shareholders. The number of votes cast for the amendmen icient for approval.	1(s)
	oved by the shareholders through voting groups. The following states ach voting group entitled to vote separately on the amendment(s):	nent
"The number of votes cast fo	the amendment(s) was/were sufficient for approval	
by	(voting group)	
	(voting group)	
☐ The amendment(s) was/were adop action was not required.	ted by the board of directors without shareholder action and sharehol	der
☐ The amendment(s) was/were adop action was not required.	ted by the incorporators without shareholder action and shareholder	
Dated	08/18/2017 Eban Copez	
Signature 1557	Dan lopez	
(By a dire selected,	retor, president or other officer – if directors or officers have not been by an incorporator – if in the hands of a receiver, trustee, or other co d fiduciary by that fiduciary)	
E	STEBAN LOPEZ	
_	(Typed or printed name of person signing)	
p	RES	
****	(Title of person signing)	