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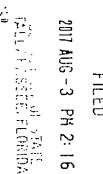
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COVER LETTER

TO: Amendment Section Division of Corporations

NAME OF CORPO	RATION: UNLIMITED KE	NDALL, INC.	
DOCUMENT NUM	P15000027872		· · · · · · · · · · · · · · · · · · ·
The enclosed Articles	of Amendment and fee are su	bmitted for filing.	
Please return all corre	spondence concerning this ma	tter to the following:	
	ANGEL MEZA		
	<u> </u>	Name of Contact Perso	n
	UNLIMITED KENDALL,IN	∛C	
		Firm/ Company	
	8368 SW 152 AVE APT # 4	5	
		Address	
	MIAMI, FL 33193		
		City/ State and Zip Cod	e
maze	angel33@hotmail.com		
	_ _	sed for future annual report	notification)
	E man address, (to be a.	,	The stricture of the st
For further informatio	n concerning this matter, pleas	se call:	
ANGEL MEZA		786 at (631-1250
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	artment of State;
■ \$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)
Am Div P.O	iling Address endment Section ision of Corporations . Box 6327 ahassee, FL 32314	Amend Divisio Clifton 2661 E	Address Iment Section on of Corporations Building Executive Center Circle assee, FL 32301

Articles of Amendment to Articles of Incorporation of

FILED

UNLIMITED KENDALL, INC.		2017 AUG - 3 PK 2: 16
(Name of Corporation as	currently filed with the Florida Dept. o	f State)
P15000027872		<u>, AŬLAMASSEE, FLÖRIŌA</u>
(Document N	umber of Corporation (if known)	4
Pursuant to the provisions of section 607.1006, Florida Statuits Articles of Incorporation:	tes, this Florida Profit Corporation adop	ots the following amendment(s) to
A. If amending name, enter the new name of the corpora	tion:	
		The new
name must be distinguishable and contain the word "co "Corp.," "Inc.," or Co.," or the designation "Corp," "In word "chartered," "professional association," or the abbre	c," or "Co". A professional corporation	
B. Enter new principal office address, if applicable:		
(Principal office address <u>MUST BE A STREET ADDRESS</u>		
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)		
(mutaing unaress MAT BE A TOST OF FICE BOX)		
D. If amending the registered agent and/or registered off	lice address in Florida, enter the name	of the
new registered agent and/or the new registered office		
Name of New Registered Agent		
- (F	lorida street address)	
New Registered Office Address:	F	lorida
	(City)	(Zip Code)
New Registered Agent's Signature, if changing Registered I hereby accept the appointment as registered agent. I am for		t'the position
• • • • • • • • • • • • • • • • • • • •		· 1
		
Signature o	of New Registered 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: X Change	<u>PT</u>	John Doe	
X Remove	<u>v</u>	Mike Jones	
X Add	<u>sv</u>	Sally Smith	
Type of Action (Check One)	<u>Title</u>	<u>Name</u>	<u>Addres</u> s
1) Change	VP	GABRIELA A. CASTELLANOS	8368 SW 152 AVE APT # 45
X Add			MIAMI, FL 33193
Remove			
2) Change			
Add			
Remove			
3) Change			
Add			
Remove			
4) Change			
Add			
Remove			
5) Change			
Add			
Remove			
6) Change			
Add			
Remove			

Attach additional sheets, if necessary).	icles, enter change(s) here: (Be specific)
f an amendment provides for an exch	nange, reclassification, or cancellation of issued shares,
(if not applicable, indicate N/A)	endment if not contained in the amendment itself:

	. 07/31/2017	
The date of each amendment(s	adoption:	, if other than the
date this document was signed.		
Effective date <u>if applicable</u> :	7/31/2017	
Effective date <u>if applicable</u> :	(no more than 90 days after amendment file date)	
Note: If the date inserted in the document's effective date on the	is block does not meet the applicable statutory filing requirements, this of Department of State's records.	date will not be listed as the
Adoption of Amendment(s)	(<u>CHECK ONE</u>)	
■ The amendment(s) was/were by the shareholders was/were	adopted by the shareholders. The number of votes cast for the amendmen sufficient for approval.	t(s)
	approved by the shareholders through voting groups. The following stater for each voting group entitled to vote separately on the amendment(s):	nent
"The number of votes c	ast for the amendment(s) was/were sufficient for approval	
by	(voting group)	
·	(voting group)	
action was not required.	adopted by the board of directors without shareholder action and sharehol adopted by the incorporators without shareholder action and shareholder	der
07/31/20 Dated	017 A	
sele	a director, president or other officer – if directors or officers have not been cted, by an incorporator – if in the hands of a receiver, trustee, or other combined fiduciary by that fiduciary)	
	ANGEL MEZA	
	(Typed or printed name of person signing)	
	PRESIDENT	
	(Title of person signing)	