## Florida Department of State

Division of Corporations Electronic Filing Cover Sheet

Note: Please print this page and use it as a cover sheet. Type the fax audit number (shown below) on the top and bottom of all pages of the document.

(((H190002447063)))



H190002447063AEC0

Note: DO NOT hit the REFRESH/RELOAD button on your browser from this page.

Doing so will generate another cover sheet.

To:

Division of Corporations

Fax Number

: (850)617-6380

From:

Account Name : EXPRESS CORPORATE FILING SERVICE INC.

Account Number : I20000000146 Phone : (305)444-4994 Fax Number : (305)444-4977

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

Email Address:\_\_\_\_\_\_

9 AUG 16 PH 2;

## COR AMND/RESTATE/CORRECT OR O/D RESIGN EL PORTAL SERVICES INC

Certificate of Status	0	
Certified Copy	0	
Page Count	05	
Estimated Charge	\$35.00	

Electronic Filing Menu

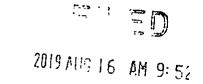
Corporate Filing Menu

Help

C. GOLDEN

AUG 1 9 2019

## Articles of Amendment to Articles of Incorporation of



EL PORTAL SERVICES INC (Name of Corporation as currently filed with the Florida Dept. of State) P15000032535 (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: 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 (Florida street address) New Registered Office Address: , Florida (City) 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. Signature of New Registered Agent, if changing

\_ Remove

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; I = Ireasurer; S = Secretary; D = Director; IR = Irustee; C = Chairman or Clerk; CEO = Chief Executive Officer; CFO = Chief Financial Officer. If an officer/director holds more than one title, list the first latter of each officer 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	SV	Sally Smith				
Type of Action (Check One)	<u>Title</u>		<u>Name</u>	<u>Addres</u> s		
1) Change	D		Roberto Carlos Reyes Quispe	20020 ISLAND ROAD		
XX Add				CUTLER BAY, FL 33189		
Remove						
2) Change	D	_	Sergio Gabriel Escobar	20020 ISLAND ROAD		
XX Add				CUTLER BAY, FL 33189		
Remove						
3)Change						
Add				<del></del>		
Remove						
4) Change		_				
Add				<del></del>		
Remove						
5) Change		_				
Add						
Remove						
6) Change	~	_				
Add						

Attach addition	adding additional Articles, enter all sheets, if necessary). (Be speci	ific)		
-		<u> </u>		
		<del>.</del>	. <u> </u>	
	<del>~~</del>			
<del></del>				
_				
an amendme	t provides for an exchange, recli	assification, or cancella	ation of issued shares.	
(if not con	implementing the amendment if i icable, indicate N/A)	not contained in the an	nenament itseii:	
(ij noi uppi	caole, maicale IVA)			
		<del>``</del>		
			<del></del>	<u> </u>
· · · · · · · · · · · · · · · · · · ·			<del></del>	•

the

the

	8/14/2019	
The date of each amendment(s) date this document was signed.	adoption:	, if other than
Effective date if applicable:		
<del></del>	(no more than 90 days after amendment file date)	
Note: If the date inserted in this document's effective date on the I	block does not meet the applicable statutory filing requirements, this department of State's records.	s date will not be listed as
Adoption of Amendment(s)	(CHECK ONE)	
☐ The amendment(s) was/were as by the shareholders was/were	dopted by the shareholders. The number of votes cast for the amendmentficient for approval.	nt(s)
☐ The amendment(s) was/were ap must be separately provided for	oproved by the shareholders through voting groups. The following states we each voting group entitled to vote separately on the amendment(s):	ement
"The number of votes cas	et for the amendment(s) was/were sufficient for approval	
by		
	(voting group)	
The amendment(s) was/were as action was not required.	dopted by the board of directors without shareholder action and shareholder	older
The amendment(s) was/were ac action was not required.	lopted by the incorporators without shareholder action and shareholder	
8/14/2019 Dated		
Signature	) - [1] P	
(By a	director president or other officer - if directors or officers have not be	
	ed, by and incorporator — if in the hands of a receiver, trustee, or other c nted fiduciary by that fiduciary)	ourt
-1.	JEAN PAOLO PANTA ECA	
	(Typed or printed name of person signing)	<del></del>
	President	
	(Title of person signing)	<del></del>