Florida Department of State

Division of Corporations Electronic Filing Cover Sheet

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(((H19000244994 3)))



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To:

Division of Corporations

Fax Number : (850)617-6380

From:

Account Name : INDEPENDENT TAX SERVICES PLUS CORP.

Account Number : I20020000072

Phone : (305)887-0001

Fax Number

: (305)884-6444

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

Email Address: Independent axsenses & Hormail. com

COR AMND/RESTATE/CORRECT OR O/D RESIGN INDEPENDENT TAX SERVICES PLUS CORP

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Corporate Filing Menu

Help

C. GOLDEN

TO: Amendment Section

H 1900D244994

COVER LETTER

Division of Corporations					
NAME OF CORPORATION: INDEPENDENT	TAX SERVICES PLUS CO	ORP			
DOCUMENT NUMBER: P15000040870	*****				
The enclosed Articles of Amendment and fee are s	ubmitted for filing.				
Please return all correspondence concerning this m	atter to the following:				
MARCO OLARTE					
	Name of Contact Person	1			
INDEPENDENT TAX SER	INDEPENDENT TAX SERVICES PLUS CORP				
No. 47. 444 well + 1 medicar diable many distribution of the state of the same that blanch a many distribution of the blanch and the blanch a many distribution of the blanch and the bla	Firm/ Company				
1183 W 29 TH STREET 2nd	d FLOOR				
Address					
HIALEAH, FL,33012					
	City/ State and Zip Cod	2			
INDEPENDENTTAXSERVICES	@HOTMAIL.COM				
	sed for future annual report	notification)			
For further information concerning this matter, plea	se call:				
MARCO OLARTE	at (³⁰⁵	887-0001			
Name of Contact Person	Area Co	de & Daytime Telephone Number			
Enclosed is a check for the following amount made	payable to the Florida Depa	rtment of State:			
\$35 Filing Fee	□\$43.75 Filing Fee & Certified Copy (Additional copy is enclosed)	□\$52.50 Filing Fee Certificate of Status Certified Copy (Additional Copy is enclosed)			
Mailing Address	Street a	Address			
Amendment Section	Amend	ment Section			
Division of Corporations	Division of Corporations				
P.O. Box 6327		Building			
Tallahassee, FL 32314	2661 18	tecutive Center Circle			

Tallahassee, FL 32301

From:

08/16/2019 13:32

#125 P.003/006

H 19 000 244 9943

2019 APS 16 AM 9:5

Articles of Amendment Articles of Incorporation of

INDEPENDENT TAX SERVICES PLU	JS CORP			
(Name	of Corporation as currently	filed with the Flori	da Dept. of State)	
P15000040870				
	(Document Number of	Corporation (if know	n)	
Pursuant to the provisions of section 607 its Articles of Incorporation:	.1006, Florida Statutes, this F	lorida Profit Corpor	ation adopts the following amendment	(s) t
A. If amending name, enter the new n	ame of the corporation:			
name must be distinguishable and cor "Corp.," "Inc.," or Co.," or the design word "chartered," "professional associations of the control of t	nation "Corp." "Inc." or "C	o". A professional		
B. Enter new principal office address, (Principal office address MUST BE A S		·		
 C. Enter new mailing address, if appl (Muiling address MAY BE A POST) D. If amending the registered agent ar new registered agent and/or the ne 	OFFICE BOX) ad/or registered office addre	ss in Florida, enter t	he name of the	
Name of New Registered Agent	ALINA SIMON LLANES			
Company of the Alberta Alberta	18752 NW 84 PL UNIT 601	-6	···	
	(Florida stree	t address)		
New Registered Office Address:	HIALEAH		Florida 33015	
the regulation of the rain and	(C	ily)	(Zip Code)	
New Registered Agent's Signature, if c	hanging Registered Agent: ered agent. I am familiar with All Simon Signature of New Reg			

From:

H190000449943

08/16/2019 13:32

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 Doc	
X Remove	<u>V</u>	Mike Jones	
X Add	<u>sv</u>	Sally Smith	
Type of Action (Check One)	Title	Name	Address
1) Change	P	MARCO OLARTE	8974 NW 145 TH STREET
			MIAMI LAKES FL 33018
X Remove			
2) Change	P	ALINA SIMON LLANES	18752 NW 84 PL UNIT 6016-6
X Add			HIALEAH FL 33015
Remove			
3) Change			<u> </u>
Add			
Remove			
4)Change			
Add			
Remove			
5) Change			
Addi			
Remove			
5) Change			
Add			
Remove			

H190002449943

that that the transfer of the	icles, enter change(s) here: (Be specific)
·	
	
an amendment provides for an excha- provisions for implementing the amen (if not applicable, indicate N/A)	ange, reclassification, or cancellation of issued shares, adment if not contained in the amendment itself:
(i/ not applicable, smilette (sm.)	
(i) not applicable. Smith the same to a	

08/16/2019 13:32 #125 P.006/006

From:

H190002449943

The date of each amendment(s) adoption	n:	, if other than the
date this document was signed.		
08/16/2019)	
Effective date if applicable:	(no more than 90 days after amendment file date)	.
	,	
Note: If the date inserted in this block d document's effective date on the Departme	oes not meet the applicable statutory filing requirements, this dat ent of State's records.	e will not be listed as the
Adoption of Amendment(s)	(CHECK ONE)	
☐ The amendment(s) was/were adopted b by the shareholders was/were sufficient	y the shareholders. The number of votes east for the amendment(s) t for approval.	
	by the shareholders through voting groups. The following statement orting group entitled to vote separately on the amendment(s):	11
"The number of votes cast for the	amendment(s) was/were sufficient for approval	
by		
	(voting group)	
The amendment(s) was/were adopted by action was not required.	y the board of directors without shareholder action and shareholder	
☐ The amendment(s) was/were adopted by action was not required.	y the incorporators without shareholder action and shareholder	
08/16/2019 Dated	·····	
Signature 44	nev lo larte	
(By a director, selected, by an	president or other officer – if directors or officers have not been incorporator – if in the hands of a receiver, trustee, or other court iciary by that fiduciary)	
MARC	CO OLARTE	
	(Typed or printed name of person signing)	
PRESI	DENT/DIRECTOR	
	(Title of person signing)	