P150000 43702

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MO 2018

COVER LETTER

TO: Amendment Section Division of Corporations

NAME OF CORPOR	ATION: FRANJORCA CO	RP		
DOCUMENT NUMB	ER: P15000043702			
The enclosed Articles of	of Amendment and fee are sub	omitted for filing.		
Please return all corres	pondence concerning this mat	ter to the following:		
	CARLA RENDON			
	Name of Contact Person FRANJORCA CORP			
		Firm/ Company	.	
	11245 NW 43RD TERR			
		Address		
	DORAL FLORIDA 33178			
		City/ State and Zip Code		
carlar	rendon6@gmail.com			
	E-mail address: (to be us	ed for future annual report	notification)	
For further information	n concerning this matter, pleas	e call:		
CARLA RENDON		305 at (504-0752	
Name of Contact Person			de & Daytime Telephone Number	
Enclosed is a check fo	r the following amount made	payable to the Florida Depa	rtment of State:	
S35 Filing Fee	□S43.75 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)	
Ame Divi P.O	endment Section ision of Corporations Box 6327 ahassee, FL 32314	Amend Divisio Clifton 2661 E	Address ment Section on of Corporations Building xecutive Center Circle assec, FL 32301	

Articles of Amendment to **Articles of Incorporation** of



FRANJORCA CORP (Name of Corporation as currently filed with the Florida Dept. of State) P15000043702

ent(s) to

	(Document Number	of Corporation (if known)		
Pursuant to the provisions of section 607, its Articles of Incorporation:	1006, Florida Statutes, thi	s Florida Profit Corporation adopts the following amer	ndme	
A. If amending name, enter the new na	me of the corporation:			
		The		
name must be distinguishable and con- "Corp.," "Inc.," or Co.," or the design word "chartered," "professional associa	ation "Corp," "Inc," or	ion," "company," or "incorporated" or the abbrevio "Co". A professional corporation name must contain "P.A."	ation n-the	
		11245 NW 43RD TERR		
B. Enter new principal office address, if applicable: (Principal office address <u>MUST BE A STREET ADDRESS</u>)		DORAL FL 33178		
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)		11245 NW 43RD TERR		
		DORAL FL 33178		
D. If amending the registered agent an new registered agent and/or the new	id/or registered office ad	dress in Florida, enter the name of the		
	FLORIDA CORPORATION REPORT INC			
Name of New Registered Agent				
	2634 NW 97TH AVE	street address)		
	DORAL			
New Registered Office Address:		(City) Slorida 33172 (City) (Zip Code)	—	
		, carry		
New Registered Agent's Signature, if c	hanging Registered Age	nt:		
I hereby accept the appointment as regis	tered agent. I am familia	r with and accept the obligations of the position.		
	(D) D7			
	yang !	W.TL		

Signature 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 Doc 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 Doc, 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	\underline{V}	Mike Jones		
X Add	<u>\$V</u>	Sally Smith		
Type of Action (Check One)	<u>Title</u>	<u>Name</u>	<u>Addres</u> s	
1) X Change	PSD	RENDON, CARLA	11245 NW 43RD TERR	
Add			DORAL FL 33178	
Remove				
2) Change	VPTD	CASELLA, FRANCISCO	11875 SW 152TH PLACE	
Add			MIAMI FL 33196	
X Remove				
3) Change	VPTD	CASELLA, JORGE	11245 NW 43RD TERR	
X Add			DORAL FL 33178	
Remove				
4) Change				
Add				
Remove				
5)Change		_		
Add				
Remove				
6) Change				
Add				
Romovo				

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The date of each amendmen	t(s) adoption:	, if other than the
date this document was signed Effective date if applicable:	06/27/2018	
Effective date <u>if applicable.</u>	(no more than 90 days after amendment file date)	
Note: If the date inserted in document's effective date on t	this block does not meet the applicable statutory filing requirements, this date the Department of State's records.	will not be listed as the
Adoption of Amendment(s)	(<u>CHECK ONE</u>)	
■ The amendment(s) was/we by the shareholders was/w	ere adopted by the shareholders. The number of votes cast for the amendment(s) were sufficient for approval.	
☐ The amendment(s) was/we must be separately provid	ere approved by the shareholders through voting groups. The following statement led for each voting group entitled to vote separately on the amendment(s):	ıt
"The number of vote	es east for the amendment(s) was/were sufficient for approval	
by	(voting group)	
	(voting group)	
☐ The amendment(s) was/we action was not required.	ere adopted by the board of directors without shareholder action and shareholder	
☐ The amendment(s) was/we action was not required.	ere adopted by the incorporators without shareholder action and shareholder	
06/2	7/2018	
Dated Signature _	acherlet.	
, (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)	
	CARALA RENDON	
	(Typed or printed name of person signing)	
	PRESIDENT	
	(Title of person signing)	