## P15000058191

/D-		
(че	questor's Name)	
(Ad	dress)	
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PICK-UP	☐ WAIT	MAIL
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Certified Copies	_ Certificates	OI Status
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Special Instructions to	Filing Officer:	

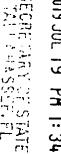


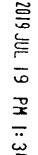


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## COVER LETTER

**TO:** Amendment Section Division of Corporations

NAME OF CORPO	DRATION: GASTON ISOLD	I, PA		
DOCUMENT NUM	P15000058191			
The enclosed Article	s of Amendment and fee are st	ibmitted for filing.		
Please return all corr	espondence concerning this ma	tter to the following:		
	LILY PADIAL			
	<del></del>	Name of Contact Person	ก	
	PADIAL & COMPANY PA			
		Firm/ Company		
	000 003702 155 1 1753 1513			
	999 PONCE DE LEON BLV			
		Address		
	CORAL GABLES, FLORID	A 33134		
		City/ State and Zip Cod	c	
LPA	DIAL@PADIALCPA.COM			
	E-mail address: (to be u	sed for future annual report	notification)	
For further informati	on concerning this matter, plea		443-4305	
Name	of Contact Person	at (ar Co	) 443-4305 de & Daytime Telephone Number	
Enclosed is a check t	or the following amount made			
S35 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)	
Mailing Address		Street	Address	
An	nendment Section	Amendment Section		
	vision of Corporations	Division of Corporations		
	), Box 6327 flahassec, F1, 32314	Clifton Building 2661 Executive Center Circle		
1.40	manaco, i ir cupir	Tallahassee, FL 32301		

## Articles of Amendment to Articles of Incorporation of

## GASTON ISOLDEPA

(Name of Corporation as curren	tly filed with the Florida Dept. of State)	- · · · · · · · · · · · · · · · · · · ·		
P15000058191				
(Document Number	of Corporation (if known)		<del></del>	
Pursuant to the provisions of section 607.1006, Florida Statutes, this its Articles of Incorporation:	s Florida Profit Corporation adopts the fe	ollowing a	mendm	ent(s)
A. If amending name, enter the new name of the corporation:		417	,	
name must be distinguishable and contain the word "corporati "Corp.," "Inc.," or Co.," or the designation "Corp." "Inc," or word "chartered," "professional association," or the abbreviation	"Co" A professional corporation name	the abbr	he nev veviation nam th	n
B. Enter new principal office address, if applicable:	1845 NE 187 STREET			
(Principal office address <u>MUST BE A STREET ADDRESS</u> )	NORTH MIAMI BEACH, FL 33179	22	2019	
		- j. j.	اال	***
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)	1845 NE 187 STREET	\$ 50 C	19 P	dan Can San San San San San San San San San S
	NORTH MIAMI BEACH, FL 33179		<del></del>	P.co
			<u>မ</u>	
D. If amending the registered agent and/or registered office address registered agent and/or the new registered office address				
Name of New Registered Agent				
· .				
(Florida s	(reet address)			
New Registered Office Address:	, Florida	/Zip Cod		
	(v iii)	77.4° ( 17)	• ,	
New Registered Agent's Signature, if changing Registered Agen I hereby accept the appointment as registered agent. I am familian		diion.		
Signature of Nove	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>\( \frac{}{} \)</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) X Change	P/D	ISOLDI, ORLANDO GASTON M	1845 NE 187 STREET
Add			N. MIAMI BEACH, FL 33179
Remove			
2) Change			
Add			
Remove			
3 ) Change			
Add			
Remove			
4) Change			
Add			
Remove			
5) Change			
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б) Change			
Add			
Remove			

Attach addi	g or adding additi tional sheets, it ne	cessary) (Be:	specific)				
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f an ameno	dment provides fo	or an exchange,	reclassification	n, or cancellatio	n of issued share	es.	
provisions	for implementing	g the amendmer	<u>it if not contair</u>	aed in the amen	<u>dment itself:</u>		
(if not	applicable, indica	ite N/A)					
	<del></del>						

The date of each amendment(s) ad-	option:	if other than the
date this document was signed.	-	
Effective date if applicable:		
	(no more than 90 days after amendment file date)	
Note: If the date inserted in this of document's effective date on the Dep	ock does not meet the applicable statutory filing requirements, this dontinent of State's records	are will not be listed as the
Adaption of Amendment(s)	( <u>CHECK ONE</u> )	
The amendment(s) was/were adop by the shareholders was/were saf	sted by the shareholders. The number of votes east for the amendment freient for approval,	(>1
The amendment(s) westwere appropriate to separately provided for a	eved by the shareholders through voting groups. The following states such voting group cotaled to vote separately on the amendment(s):	ten1
"The number of votes cast f	or the amendment(s) was/were sufficient for approvel	
by	(managraap)	
☐ The amondment(s) was/were adoption was not required.	ated by the from toof directors without shareholder action and sharehold	ler
The amendment(s) was/were adopted in max not required.	oted by the incorporators without shareholder action and shareholder	
AJLY 8, 201 Dates	9 1 7 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	
lecybil	sector, provident or other officer—if directors or officers have not been by an inconfermal —if in the hands of a receiver, busies, or other confidenciary by that fiduciary)	nrt
1	SOLDI, ORLANDO GASTON M	
-	(Typed or printed name of person signing)	
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	(Tale of person supplied)	