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(Address)
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(Business Entity Name)
(Document Number)
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2018 MAY IL AMIL: 03 SECRETARY OF STATE

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COVER LETTER

TO: Amendment Section Division of Corporations

Tallahassee, FL 32314

NAME OF CORPO		OF AMERICA, INC.	
DOCUMENT NUMI	P15000063048 BER:		
The enclosed Articles	of Amendment and fee are su	bmitted for filing.	
Please return all corre	spondence concerning this ma	tter to the following:	
	Betty Vanessa Garcia Garcia		
	ECHO SOUNDS OF AMER	Name of Contact Person ICA, INC.	1
·	333 Palm St # 3	Firm/ Company	
	Hollywood, Fl 33019	Address	· · · · · · · · · · · · · · · · · · ·
		City/ State and Zip Cod	e
intern	management@outlook.com		
	E-mail address: (to be us	sed for future annual report	notification)
For further informatio	n concerning this matter, pleas	se cail:	
Orlane Delgadillo		305 at (924-8076
Name	of Contact Person	Area Co	de & Daytime Telephone Number
Enclosed is a check fo	r 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)
Ame Div	iling Address endment Section ision of Corporations Box 6327	Ameno Divisio	Address Iment Section on of Corporations Building

2661 Executive Center Circle Tallahassee, FL 32301

Articles of Amendment Articles of Incorporation

				ASSOCIATION AND
	Articles of A	Amendment		3550 TAY
	Articles of la	-		AHARA AH
CHO SOUNDS OF AMERICA, INC.	,	-		SCORE
(<u>Name</u>) 1,5000063048	of Corporation as curren	tly filed with the Florid	la Dept. of State)	ORINE
	(Document Number)	of Corporation (if known		
ursuant to the provisions of section 607. Articles of Incorporation:		•		ring amendment(s) to
If amending name, enter the new na	ame of the corporation:			
VA ime must be distinguishable and con				The new
ord "chartered," "professional associa Enter new principal office address, rincipal office address <u>MUST BE A S</u>	if applicable:			
Enter new mailing address if analy	icabla:			
Enter new mailing address, if applicable: (Mailing address <u>MAY BE A POST OFFICE BOX</u>)		PO BOX 832554		
		MIAMI, FL 33283		
				<u> </u>
. If amending the registered agent ar new registered agent and/or the ne			he name of the	
Name of New Registered Agent	BETTY VANESSA GAR			
	333 PALM ST # 3			
		treet address)	350.0	
New Registered Office Address:	HOLTZ, MOOD		33019 , Florida	
		(City)	17.1	ф (.0ae)
ew Registered Agent's Signature, if c iereby accept the appointment as regisi	hanging Registered Agen tered agent - Lam familiar	it: with and accept the obl	ivations of the position	7
	/		against sy the profiler	
<u>-</u>	V GULTANAN Signature of New	Registered Agent, if cha	nging	

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.

X Change	PT	John læ	<u>oe</u>	
X Remove	<u>v</u>	Mike Jo	ones .	
X Add	<u>sv</u>	Sally St	nith	
Type of Action (Check One)	<u>Title</u>		Name	Address
1)Change	M		BETTY VANESSA GARCIA GARCIA	333 PALM ST # 3
X Add				HOLLYWOOD, FL33019
Remove				
2) Change	0		VANESSA B GARCIA	333 PALM ST
_				HOLLYWOOD, FL33019
Add X Remove				
3)Change		_		
Add				
Remove				
4) Change		_		
Add				
Remove				· · · · · · ·
5)Change				
Add				
Remove				
6)Change	-	<u> </u>		
Add				
Remove				

-	(Be specific)
· · · · · · · · · · · · · · · · · · ·	

fing amendment aroulds: for an each	unga reclusification or cancellation of issued characteristics
provisions for implementing the ame	nange, reclassification, or cancellation of issued shares, and ment if not contained in the amendment itself:
provisions for implementing the ame	

The date of each amendment(s) adoption:	, 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 block does not meet the applicable statutory filing requirements, the document's effective date on the Department of State's records.	nis date will not be listed as the
Adoption of Amendment(s) (CHECK ONE)	
☐ The amendment(s) was/were adopted by the shareholders. The number of votes cast for the amenda by the shareholders was/were sufficient for approval.	nent(s)
☐ The amendment(s) was/were approved by the shareholders through voting groups. The following st must be separately provided for each voting group entitled to vote separately on the amendment(s)	
"The number of votes cast for the amendment(s) was/were sufficient for approval	
by	
by	
■ The amendment(s) was/were adopted by the board of directors without shareholder action and share action was not required.	cholder
☐ The amendment(s) was/were adopted by the incorporators without shareholder action and sharehold action was not required.	ler
$\frac{5}{10} \frac{5}{10} $	
Signature Voerse Contra	
(By a director, president or other officer - if directors or officers have not	
selected, by an incorporator – if in the hands of a receiver, trustee, or other appointed fiduciary by that fiduciary)	r court
i i	
BETAV ANESSA GARENA (2) (Typed or printed name of person signing)	oreia
(Typed or printed name of person signing)	
ORCICER	
(Title of person signing)	