## P15000070002

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## **COVER LETTER**

**TO:** Amendment Section Division of Corporations

A Section of the sect

NAME OF CORPOR	RATION:BABYONS (	CORP	
DOCUMENT NUMI	BER:P15000070002		
The enclosed Articles	of Amendment and fee are su	bmitted for filing.	
Please return all corre	spondence concerning this ma	tter to the following:	
	MAGALY NAVARRO		
		Name of Contact Person	1
	MAGALY'S MULTISERVI	CES LLC	
		Firm/ Company	
	8421S ORANGE BLOSSOM	TRAIL SUITE 129	
		Address	
	ORLANDO, FL 32809		
		City/ State and Zip Code	2
	MAGALYNFMS@GMAIL.	СОМ	
	_	sed for future annual report	notification)
For further information	n concerning this matter, pleas		. 852-7000
Name o	of Contact Person	at ( at (	852-7000 de & Daytime Telephone Number
Enclosed is a check fo	r 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)
Ame Divi P.O.	ting Address andment Section sion of Corporations Box 6327 ahassee, FL 32314	Amend Divisio The Ce	Address ment Section n of Corporations entre of Tallahassee J. Monroe Street, Suite 810

Tallahassee, FL 32303

## Articles of Amendment to Articles of Incorporation of

BABYONS CORP

DABTONS CORP		
(Name of Corporation as curren	tly filed with the Florida Dept. of Stat	<u>e</u> )
P15000070002		
(Document Number	of Corporation (if known)	
Pursuant to the provisions of section 607.1006, Florida Statutes, thi its Articles of Incorporation:	s Florida Profit Corporation adopts the	following amendment(s) to
A. If amending name, enter the new name of the corporation:		
		The new
name must be distinguishable and contain the word "corporation," "Inc.," or Co.," or the designation "Corp," "Inc," or "Co". "chartered," "professional association." or the abbreviation "P.A	A professional corporation name mus	breviation "Corp.," st contain the word
B. Enter new principal office address, if applicable:	15018 CHAPTER WAY	
(Principal office address <u>MUST BE A STREET ADDRESS</u> )	WINTER GARDEN, FL. 34787	
		···-
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)	15018 CHAPTER WAY	
	WINTER GARDEN, FL. 34787	
		<u>-                                    </u>
D. If amending the registered agent and/or registered office adenew registered agent and/or the new registered office address  Name of New Registered Agent		
(Florida s	treet address)	
New Registered Office Address:	, Florida_	
	(City)	(Zip Code)
New Registered Agent's Signature, if changing Registered Agen I hereby accept the appointment as registered agent. I am familiar	t: with and accept the obligations of the p	osition.
		2021 JUNI 10 PH
Signature of New 1	Registered Agent, if changing	
Check if applicable		10
☐ The amendment(s) is/are being filed pursuant to s. 607.0120 (11)	) (e), F.S.	g
		Ω

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 Do	<u>oe</u>	
X Remove	$\underline{\mathbf{v}}$	Mike Jo	ones	
<u>X</u> Add	<u>sv</u>	Sally Sn		
		Sany Su		
Type of Action (Check One)	<u>Title</u>		<u>Name</u>	<u>Addres</u> s
1) Change				
Add				
Remove				
2) Change		_		
Add				
Remove 3 ) Change		_		
Add				
Remove				
4) Change	<u></u>	_		
Add				
Remove				
5) Change		<del>_</del>		
Add				
Remove				
6) Change		_		
Add				
Remove				

E. If amending or adding additional Articles, enter change(s) here: (Attach additional sheets, if necessary). (Be specific)
WITH THIS AMENDMENT I WANT TO ESTABLISH THE PERCENTAGE OF DISTRIBUTION OF SHARES
THAT EACH SHAREHOLDER HAS IN THE COMPANY.
PRESIDENT: MARIA P. TORRES-TELLO have the 98% shares.
VP: JULIANA CAMARGO-TORRES have the 1% share.
VP: SAMUEL CAMARGO-TORRES have the 1% share.
F. If an amendment provides for an exchange, reclassification, or cancellation of issued shares, provisions for implementing the amendment if not contained in the amendment itself:
(if not applicable, indicate N/A)
·

	1/2021	
The date of each amendment(s) adoption:		, if other than the
date this document was signed. 04/01/2021		
Effective date if applicable:		
	no more than 90 days after amendment file date)	
Note: If the date inserted in this block does not locument's effective date on the Department of St	meet the applicable statutory filing requirements, rate's records.	, this date will not be listed as the
adoption of Amendment(s) (CHE)	CK ONE)	
The amendment(s) was/were adopted by the incaction was not required.	corporators, or board of directors without sharehol	der action and shareholder
The amendment(s) was/were adopted by the ship by the shareholders was/were sufficient for app	areholders. The number of votes cast for the amer proval.	ndment(s)
The amendment(s) was/were approved by the s must be separately provided for each voting gr	hareholders through voting groups. The following coup entitled to vote separately on the amendment(	; statement (s):
"The number of votes cast for the amenda	nent(s) was/were sufficient for approval	2021
by(voting	g group)	2021 JUST 1.0
06/07/2021		10
06/07/2021 Dated	<del></del>	70
Signature//ana	Tones Tell	تن
(By a director, preside	nt or other officer – if directors or officers have no orator – if in the hands of a receiver, trustee, or oth that fiduciary)	ot been —
MARIA P. TO	DRRES-TELLO	
(Ту	ped or printed name of person signing)	
PRESIDENT		
(Tit	tle of person signing)	