## P15000073997

(Requestor's Name)		
(Address)	9003047732	89
(City/State/Zip/Phone #)		
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(Business Entity Name)	TALLEN?	
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## COVER LETTER

**TO:** Amendment Section Division of Corporations

NAME OF CORPORATION	ON:KRAM &	KRAM CORP			
DOCUMENT NUMBER:	P:	5000073997			
The enclosed Articles of An	nendment and fee are su	bmitted for filing.			
Please return all correspond	ence concerning this ma	tter to the following:			
		OSVALDO MARTINEZ			
	Name of Contact Person				
	O&J PF	ROFESSIONAL SERVICE	S INC		
		Firm/ Company			
		13550 SW 88 ST STE 150	)		
		Address	<del></del>		
		MIAMI FL 33186			
		City/ State and Zip Cod	·		
	OSVAL	DOEMARTINEZ@AOL.C	COM		
	E-mail address: (to be us	sed for future annual report	notification)		
For further information cond	- '				
OSVALDO M		at (	de & Daytime Telephone Number		
Name of Cor	ntact Person	Area Co	de & Daytime Telephone Number		
Enclosed is a check for the t	ollowing amount made	payable to the Florida Depa	artment of State:		
■ \$35 Filling 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 Amendment Section		Amend	Address Iment Section		
Division of Corporations		Division of Corporations Clifton Building			
P.O. Box 6327 Tallahassee, FL 32314		2661 Executive Center Circle			

Tallahassee, FL 32301

## Articles of Amendment to Articles of Incorporation of

KRA	AM & KRAM CORP
(Name of Corporation a	s currently filed with the Florida Dept. of State)
	P15000073997
(Document	Number of Corporation (if known)
Pursuant to the provisions of section 607,1006, Florida Staits Articles of Incorporation:	ntutes, this Florida Profit Corporation adopts the following amendment(s) t
A. If amending name, enter the new name of the corpo	ration:
	The new
name must be distinguishable and contain the word "c "Corp.," "Inc.," or Co.," or the designation "Corp." " word "chartered," "professional association." or the abbi	corporation," "company," or "incorporated" or the abbreviation Inc," or "Co". A professional corporation name must contain the
B. Enter new principal office address, if applicable:	
(Principal office address <u>MUST BE A STREET ADDRE.</u>	<u>ss</u> )
C. Enter new mailing address, if applicable:	= 1
(Mailing address MAY BE A POST OFFICE BOX)	
D. If amending the registered agent and/or registered of	office address in Florida, enter the name of the
new registered agent and/or the new registered office	
No. 2No. D. Carrell Land	
Name of New Registered Agent	
	(Florida street address)
New Registered Office Address:	, Florida
	(Zip Code)
New Registered Agent's Signature, if changing Register I hereby accept the appointment as registered agent.—I am	
The second of th	, , , , , , , , , , , , , , , , , , ,
<u>-</u>	
Signatur	e 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 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	$\underline{V}$	Mike Jones	
X Add	<u>sv</u>	Sally Smith	
Type of Action (Check One)	<u>Title</u>	<u>Name</u>	<u>Address</u>
1) X Change	V	MARIA TERESA PENA	9725 NW 52 ST APT 205
Add			DORAL FL 33178
Remove			
2) X Change	Р	MARCOS ANTONIO GARCIA	9725 NW 52 ST APT 205
Add		-	DORAL FL 33178
Remove			
3.) Change			
Add			
Remove			
4) Change			
Add			
Remove			
51 Change			
Add			
Remove			
6) Change			
Add			
Remove			

famending or adding additional Arti Attach additional sheets, if necessary).	(Be specific)
f an amendment provides for an exch	hange, reclassification, or cancellation of issued shares.
(if not applicable, indicate N/A)	ndment if not contained in the amendment itself:

The date of each amendment(s) adoption:	, if other than the
date (ms 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, document's effective date on the Department of State's records.	this 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 amend by the shareholders was/were sufficient for approval.	iment(s)
☐ The amendment(s) was/were approved by the shareholders through voting groups. The following must be separately provided for each voting group entitled to vote separately on the amendment.	statement 8):
"The number of votes east for the amendment(s) was/were sufficient for approval	
by	
(voting group)	
☐ The amendment(s) was/were adopted by the board of directors without shareholder action and sha action was not required.	reholder
☐ The amendment(s) was/were adopted by the incorporators without shareholder action and shareho action was not required.	lder
Dated 10.17. 2017	
Signature	//
(By a director, president or other officer - if directors or officers have no	
selected, by an incorporator - if in the hands of a receiver, trustee, or oth	er court
appointed fiduciary by that fiduciary)	
MARCOS ANTONIO GARCIA	
(Typed or printed name of person signing)	
PRESIDENT	
(Title of person signing)	

. . . . .