## 1915000091187

(Red	questor's Name)	
(Add	dress)	
(Add	dress)	
(City	y/State/Zip/Phone	e #)
PICK-UP	WAIT	MAIL
(Bus	siness Entity Nar	ne)
`	•	•
(Do	cument Number)	
(==	,	
Certified Copies	Certificates	of Status
Certified Copies	Centinicates	S OI Status
Special Instructions to I	Filing Officer:	

Office Use Only



500313425095

05/21/16--01035--014 \*\*35.00

2018 MAY 21 PH 4: 50
SECRETARY OF STATE

C. GOLDEN

## COVER LETTER

TO: Amendment Section Division of Corporations

NAME OF CORPOR	NATALIA L. BR/	AY, PA			
DOCUMENT NUME					
	of Amendment and fee are su	bmitted for filing.			
Please return all corres	pondence concerning this ma	tter to the following:			
	EULALIA R RAXACH				
	Name of Contact Person				
	ON TIME ACCOUNTING TAX INC				
	·	Firm/ Company			
	721 E 48 ST	, ,			
	• • •	Address			
	HIALEAH, FL. 33013				
		City/ State and Zip Cod	e		
lalv@	ontimeaccountingtax.com				
<del></del>	•	sed for future annual report	notification)		
		•	,		
For further information	concerning this matter, pleas	se call:			
EULALIA R RAXAC	тн	786 at (	247-7224		
Name of Contact Person			de & Daytime Telephone Number		
Enclosed is a check for	r the following amount made p	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)		
Ame Divi P.O.	ling Address Indiment Section Indicate the Address Indicate the Indicate	Amenc Divisio Clitton 2661 F	Address Iment Section on of Corporations Building Executive Center Circle assec, FL 32301		

## Articles of Amendment Articles of Incorporation of

FILED

2018 MAY 21 PH 4: 50

NATALIA L. BRAY, PA

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

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

P15000091187

ient(s) to

(Document N	Sumber of Corporation (if known)
	ates, this Florida Profit Corporation adopts the following amendm
·	ations
<ul> <li>A. If amending name, enter the new name of the corporation.</li> <li>N/A</li> </ul>	<u>111091:</u>
name must be distinguishable and contain the word "co	The ne- prporation," "company," or "incorporated" or the abbreviation ac," or "Co". A professional corporation name must contain the eviation "P.A."
B. Enter new principal office address, if applicable:	3101 Port Royale Blvd. APT 234
(Principal office address <u>MUST BE A STREET ADDRES.</u>	Fort Lauderdate, FL 33308
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)	3101 Port Royale Blvd, APT 234
	Fort Lauderdale, FL 33308
D. If amending the registered agent and/or registered of new registered agent and/or the new registered office	
Name of New Registered Agent N/A	
- (1	Florida street address)
New Registered Office Address:	, Florida
	(City) (Zip Code)
New Registered Agent's Signature, if changing Registered levels the appointment as registered agent. I am J	
	of New Registered Agent, if changing

Page 1 of 4

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	<u>PT</u>	John Do	<u>e</u>	
X Remove	$\underline{V}$	Mike Jo	nes	
X Add	$\underline{SV}$	Sally Sm	<u>uith</u>	
Type of Action (Check One)	<u>Title</u>		Name	<u>Addres</u> s
1) Change		_		
Add				
Remove				
2) Change		_		
Add				
Remove				
3 ) Change		_		
Add				
Remove				
4) Change				
Add		_		
Remove				
<del></del>				
5) Change		_	·	
Add				
Remove				
6) Change		_		
Add				
Remove				

If amending or adding additional Articles, enter change(s) here:	
(Attach additional sheets, if necessary). (Be specific)	
<del></del>	<del></del>
	<del></del>
If an amendment provides for an exchange, reclassification, or cancellation of	issued shares.
provisions for implementing the amendment if not contained in the amendment (if not applicable, indicate N/A)	ent itself:
(ij noi appacaoie, inaicaie NA)	
<del></del>	
· · · · · · · · · · · · · · · · · · ·	
	•

The date of each amendment(s) date this document was signed.	adoption:	_, if other than the
Effective date <u>if applicable</u> :		
manufacture date in application.	(no more than 90 days after amendment file date)	
Note: If the date inserted in this document's effective date on the	s block does not meet the applicable statutory filing requirements, this date will Department of State's records.	not be listed as the
Adoption of Amendment(s)	(CHECK ONE)	
The amendment(s) was/were a by the shareholders was/were	dopted by the shareholders. The number of votes east for the amendment(s) sufficient for approval.	
	approved by the shareholders through voting groups. The following statement for each voting group entitled to vote separately on the amendment(s):	
"The number of votes ca	st for the amendment(s) was/were sufficient for approval	
by	(voting group)	
☐ The amendment(s) was/were a action was not required.	adopted by the board of directors without shareholder action and shareholder	
☐ The amendment(s) was/were a action was not required.	dopted by the incorporators without shareholder action and shareholder	
05/17/20 Dated	)18 	
Signature	Satalios.	
(By a selec	a director, president or other officer – if directors or officers have not been sted, by an incorporator – if in the hands of a receiver, trustee, or other court inted fiduciary by that fiduciary)	
	NATALIA L BRAY	
	(Typed or printed name of person signing)	
	PRESIDENT	
	(Title of person signing)	