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JULIARY COSTAT L**A**HASSER, FLORI

MAR 12 2010 S. YOUNG 18 MAR -9 PH 3:

COVER LETTER

TO: Amendment Section Division of Corporations

NAME OF CORPORATIO	SANS SOUCI SI	ERVICE CENTER, CORP.				
DOCUMENT NUMBER: _	P15000092211					
The enclosed Articles of Ame	ndment and fee are su	bmitted for filing.				
Please return all corresponder	nce concerning this ma	tter to the following:				
		LILIANA LOUZAN				
	1					
	SANS	SOUCI SERVICE CENTE	R, CORP.			
Firm/ Company						
1966 N.E. 123RD STREET						
	Address					
	NC	ORTH MIAMI FL. 331	81			
		City/ State and Zip Cod	e			
	lililouzan	Chotmail.co				
E-	mail address: (to be us	sed for future annual report	notification)			
For further information conce	rning this matter, pleas	se call:				
LILIANA N. LOUZAN	1	at (495 4848			
Name of Contact Person		Area Code & Daytime Telephone Number				
Enclosed is a check for the following amount made payable to the Florida Department of State:						
	\$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 Ad			Address			
Amendmen			ment Section			
	Corporations		on of Corporations			
P.O. Box 63			Building			
Tallahassee, FL 32314		2661 Executive Center Circle				

Tallahassee, FL 32301

Articles of Amendment to Articles of Incorporation of

SANS SOUCI SERVICE CENTER, CORP

(Name of Corporation as	currently filed with the Florida Dept. of State	<u> </u>	
	000092211	,	
	Sumber of Corporation (if known)		
Pursuant to the provisions of section 607.1006, Florida Statuts Articles of Incorporation:	·	ollowing a	mendment(s)
A. If amending name, enter the new name of the corpora	ation:		
		T)	ie new
name must be distinguishable and contain the word "con" "Corp.," "Inc.," or Co.," or the designation "Corp," "Inword "chartered," "professional association," or the abbre	ic," or "Co". A professional corporation name		
3. Enter new principal office address, if applicable: Principal office address <u>MUST BE A STREET ADDRESS</u>	Σ)		
		基份 c	
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)			E 71
			20
			n in
 If amending the registered agent and/or registered off new registered agent and/or the new registered office 		dir.	ယ္ ယ
Name of New Registered Agent			•
	_		
(F	Torida street address)		
New Registered Office Address:	, Florida,		
	(City)	(Zip Cod	(e)
New Registered Agent's Signature, if changing Registered	ed Agent:		
hereby accept the appointment as registered agent. I am for		sition.	
Signature o	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 <math>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>v</u>	Mike Jones	
X Add	<u>sv</u>	Sally Smith	
Type of Action (Check One)	<u>Title</u>	Name	<u>Addres</u> s
1) Change	<u>S</u>	JOSE E. ESTARI	1980 N.E. 173rd STREET
X Add		·	N. MIAMI BEACH FL. 33162
Remove			Capital Sotck : 30 %
2) Change	Т	HAYDEE L. CAPOBIANCO	1980 N.E. 173rd STREET
X Add			N. MIAMI BEACH FL 33162
Remove			Capital Stock : 30 %
3) Change			
Add			<u>.</u>
Remove			
4) Change			
Add			
Remove			
5) Change			
Add			
Remove			
6) Change			
Add			
Remove			

	(Be specific)					
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			,			
		_ _				
						
_						
				_		
						_
					-	
		45	llation of ion	ad shares		
If an amendment provides for an exch	ange, reclassifica	tion, or cance	llation of issu	ed shares, self:		
provisions for implementing the ame	ange, reclassifica ndment if not con	tion, or cance stained in the	llation of issu amendment it	ed shares, self:		
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1	03/052018	
The date of each amendment(s) ad date this document was signed.	option:	, if other than the
	/2018	
Effective date <u>if applicable</u> :	(no more than 90 days after amendment file o	date)
Note: If the date inserted in this b document's effective date on the De	ock does not meet the applicable statutory filing requirer partment of State's records.	nents, this date will not be listed as the
Adoption of Amendment(s)	(<u>CHECK ONE</u>)	
☐ The amendment(s) was/were ado by the shareholders was/were sur	oted by the shareholders. The number of votes east for the ficient for approval.	amendment(s)
	roved by the shareholders through voting groups. The followach voting group entitled to vote separately on the amend	
"The number of votes cast	or the amendment(s) was/were sufficient for approval	
by	(voting group)	
	(voting group)	
The amendment(s) was/were ado action was not required.	oted by the board of directors without shareholder action a	nd shareholder
action was not required. 03/05/20 Dated Signature (By a diselected)	nted by the incorporators without shareholder action and shareholder action ac	ave not been
appoint	ed fiduciary by that fiduciary)	
	LILIANA N. LOUZAN	
	(Typed or printed name of person signing)	
	PRESIDENT	
	(Title of person signing)	_