P150000349333

(Re	equestor's Name)		
(Ac	ldress)		
(Ac	ldress)		
(Ci	ty/State/Zip/Phone	e #)	
PICK-UP	☐ WAIT	MAIL	
(Ві	usiness Entity Nar	ne)	
(Do	ocument Number)		
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12/23.02

COVER LETTER

TO: Amendment Section Division of Corporations

NAME OF CORPO	Pepe and Linda's I	Properties Corp			
DOCUMENT NUM	IBER: P15000099333		· · · · · · · · · · · · · · · · · · ·		
The enclosed Article	s of Amendment and fee are su	bmitted for filing.			
Please return all corr	espondence concerning this ma	atter to the following:			
	Zenayda Montoya				
		Name of Contact Person	n		
	Pepe and Linda's Properties				
		Firm/ Company			
	29825 Sw 143 CT				
	Address				
Homestead Fl 33033					
		City/ State and Zip Cod	e		
	E-mail address: (to be u	sed for future annual report	notification)		
	•		,		
For further informati	on concerning this matter, pleas	se call:			
Zenayda Montoya		at (_305	244-9095		
Name of Contact Person		Area Co	de & Daytime Telephone Number		
Enclosed is a check t	or 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)		
Mailing Address Amendment Section Division of Corporations P.O. Box 6327 Tallahassee, Fl. 32314		Street Address Amendment Section Division of Corporations Clifton Building 2661 Executive Center Circle			

Tallahassee, FL 32301

Articles of Amendment to Articles of Incorporation of

(Name of Cornoration as curren	ntly filed with the Florida Dept. of State)	
P1500009933	my fied with the Florida Dept. of State)	
(Document Number	of Corporation (if known)	
Pursuant to the provisions of section 607.1006, Florida Statutes, thi its Articles of Incorporation:	is Florida Profit Corporation adopts the folio	wing amendment(s) t
A. If amending name, enter the new name of the corporation:		
		The new
name must be distinguishable and contain the word "corporat "Corp.," "Inc.," or Co.," or the designation "Corp," "Inc," or word "chartered," "professional association," or the abbreviation	"Co". A professional corporation name m	abbreviation ust contain the
B. Enter new principal office address, if applicable:	29825 SW 143 CT	
(Principal office address <u>MUST BE A STREET ADDRESS</u>)	Homestead FL 33033	29
		2 2
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)	29825 SW 143 CT	多意一片
	Homestead FL 33033	
		過ぶ
B 16		
D. If amending the registered agent and/or registered office ad new registered agent and/or the new registered of fice addre		
Name of New Registered Agent		
		
(Florida s	street address)	
New Registered Office Address:	, Florida	
	(City)	(ip Code)
New Registered Agent's Signature, if changing Registered Ager	<u>1t:</u>	
I hereby accept the appointment as registered agent. I am familian	with and accept the obligations of the position	011.
	D. C. L. C. L.	
Signature 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 Do	<u>oe</u>	
X Remove	<u>v</u>	Mike Jo	nes	
_X Add	<u>sv</u>	Sally Sn	<u>nith</u>	
Type of Action (Check One)	<u>Title</u>		Name	Address
1) Change	SEC	_	Peter J Montoya	29825 SW 143 CT
Add				Homestead FL 33033
X Remove				
2) Change		_		
Add				
Remove				
3) Change		_		
Add				
Remove				
4) Change		_		
Add				
Remove				
5) Change		_		
Add				
Remove				,_,_,
6) Change	· .	_		-
Add				
Remove				

		e specific)		
•				
		-		
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	ovides for an exchange ementing the amendme	<u>, reclassification, or c</u> ent if not contained in	cancellation of issued sha the amendment itself:	res,
n amendment pro ovisions for imple				
n amendment pro ovisions for imple (if not applicable	e, indicate N/A)			
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<u>ovisions for imple</u>	le, indicate N/A)			
<u>ovisions for imple</u>	le, indicate N/A)			

The date of each amendment	12/17/2015	, if other than the
date this document was signed		, if other than the
_	12/17/2015	
Effective date <u>if applicable</u> :	(no more than 90 days after amendment file date)	
	this block does not meet the applicable statutory filing requirements, this date ne Department of State's records.	will not be listed as the
Adoption of Amendment(s)	(CHECK ONE)	·
The amendment(s) was/wer by the shareholders was/we	re adopted by the shareholders. The number of votes cast for the amendment(s) ere sufficient for approval.	
	e approved by the shareholders through voting groups. The following statement d 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	<u> </u>	
	(voting group)	
☐ The amendment(s) was/wer action was not required.	re adopted by the board of directors without shareholder action and shareholder	
☐ The amendment(s) was/wer action was not required.	e adopted by the incorporators without shareholder action and shareholder	
Dated	x Die 18-15.	
		<u>.</u> .
	y a director, president or other officer – if directors or officers have not been lected, by an incorporator – if in the hands of a receiver, trustee, or other court	
ар	pointed fiduciary by that fiduciary)	
	ZENAYBA MONTOTA	
	(Typed or printed name of person signing)	
·	TRESIDENT,	
	(Title of person signing)	