P1600000199

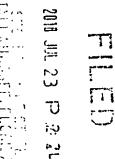
(Requestor's Name)	—
(Address)	_
(Address)	_
(City/State/Zip/Phone #)	
PICK-UP WAIT MAIL	
(Business Entity Name)	—
(Document Number)	_
Certified Copies Certificates of Status	
Special Instructions to Filing Officer:	
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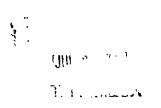
Office Use Only



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COVER LETTER

TO: Amendment Section Division of Corporations

NAME OF CORPOR	ATION: MOREL FRIAS E	EXPRESS	
DOCUMENT NUMB	ER:		
	of Amendment and fee are su	bmitted for filing.	
Please return all corres	pondence concerning this ma	tter to the following:	
	ISABEL MOREL		
		Name of Contact Person	n
		Firm/ Company	
	2624 SILKWOOD CIR AP	T 611	
		Address	
	ORLANDO, FL 32818		
		City/ State and Zip Cod	c
<u></u>	eell@yahoo.com E-mail address: (to be us concerning this matter, pleas	sed for future annual report se call:	notification)
ISABEL MOREL		407	269-4335
Name o	f Contact Person	Area Co	de & Daytime Telephone Number
Enclosed is a check for	the following amount made	payable to the Florida Depa	artment of State:
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 Divis P.O.	ing Address adment Section sion of Corporations Box 6327 hassee, FL 32314	Amend Divisio Clifton 2661 E	Address Iment Section on of Corporations Building Executive Center Circle assec, FL 32301

Articles of Amendment to Articles of Incorporation of

MOREL FRIAS EXPRESS

- 		
(Name of	Corporation as currently filed with the Florida Dept. of State)	
P16000006294		
	(Document Number of Corporation (if known)	
Pursuant to the provisions of section 607.10 its Articles of Incorporation:	006. Florida Statutes, this <i>Florida Profit Corporation</i> adopts the following an	nendment(s) to
A. If amending name, enter the new nam	ne of the corporation:	
name must be distinguishable and contai "Corp.," "Inc.," or Co.," or the designate word "chartered," "professional associatio	in the word "corporation," "company," or "incorporated" or the abbre tion "Corp," "Inc," or "Co". A professional corporation name must cont	e new viation ain the
B. Enter new principal office address, if a (Principal office address MUST BE A STR		
C. Enter new mailing address, if applica (Mailing address MAY BE A POST OF		
	/or registered office address in Florida, enter the name of the	
new registered agent and/or the new r	registered office address:	
Name of New Registered Agent		
_	(Florida street address)	
New Registered Office Address:	. Florida	
<u>New Registerea Office Aduress</u> .	(City) , 1 tortua, 1 tortua)

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	<u>V</u>	Mike Jones	
X Add	\underline{SV}	Sally Smith	
Type of Action (Check One)	<u>Title</u>	<u>Name</u>	Address
1) Change	VP	ISABEL MOREL	2624 SILKWOOD CIR APT 611
X Add			ORLANDO, FL 32818
Remove			
2) Change		_	_
Add			
Remove			
3) Change	· -		
Add			
Remove			
4) Change			
Add			
Remove			
5) Change			
Add			
Remove			
6) Change		_	_
Add			
Remove			

Attach additional sheets, if necessary).	cles, enter change(s) here: (Be specific)
If an amendment provides for an exch	ange, 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 this document was signed.		
Effective date <u>if applicable</u> :		
	(no more than 90 days after amendment file date)	
Note: If the date inserted in this document's effective date on the I	block does not meet the applicable statutory filing requirements, this date w Department of State's records.	fill not be listed as the
Adoption of Amendment(s)	(<u>CHECK ONE</u>)	
☐ The amendment(s) was/were a by the shareholders was/were	dopted by the shareholders. The number of votes cast for the amendment(s) sufficient for approval.	
	pproved 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.	dopted 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	
07/19/20 Dated	018 	
Signature	navius Dias	
(By a selec	director, president or other officer – if directors or officers have not been ted, by an incorporator – if in the hands of a receiver, trustee, or other court inted fiduciary by that tiduciary)	
	MARINO FRIAS	
	(Typed or printed name of person signing)	
	PRESIDENT	
	(Title of person signing)	