P160000 11170

(R	equestor's Name)	
(A	ddress)	
(A	ddress)	
(C	ity/State/Zip/Phone #	P)
PICK-UP	☐ WAIT	MAIL
(B	usiness Entity Name)
(D	ocument Number)	
Certified Copies	Certificates o	f Status
Special Instructions to	Filing Officer:	
		-
4.9.10		
1		

Office Use Only



700332679597

06/65/19--01664--662 **45.75

Anundla

AUG 1 4 2019 I ALBRITTON

COVER LETTER

TO: Amendment Section Division of Corporations

NAME OF CORPOR	ation: A. Garcia gro	UP, INC.		
DOCUMENT NUMB	ER: P16000011170			
	of Amendment and fee are su	bmitted for filing.		
Please return all corres	pondence concerning this ma	tter to the following:		
	KATERIN FLORES			
-		Name of Contact Person	n	
-		Firm/ Company		
_	12401 SW 187 TERRACE			
		Address		
_	MIAMI, FL 33177			
		City/ State and Zip Cod	e	
CROE	BLESR@BELLSOUTH.NET	-		
	E-mail address: (to be u	sed for future annual report	notification)	
For further information	concerning this matter, pleas	se call:		
CARLOS ROBLES		at (_305	205-6550	
Name o	f Contact Person	Area Code & 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)	
Amei Divis P.O.	ing Address indment Section ion of Corporations Box 6327 hassec, FL 32314	Amenc Divisio Clitton	Address Iment Section on of Corporations Building Executive Center Circle	

Tallahassee, FL 32301

Articles of Amendment to Articles of Incorporation of

A. GARCIA GROUP, INC

(Name of Corporation as co	urrently f	iled with the	Florida Der	t. of State)		-
P16000011170						
(Document Nu	mber of C	orporation (if	known)			
Pursuant to the provisions of section 607,1006, Florida Statute its Articles of Incorporation:	es, this <i>Fla</i>	orida Profit Ce	orporation a	idopts the fo	ollowing ame	ndment(s) t
A. If amending name, enter the new name of the corporat	ion:					
					The	neur
name must be distinguishable and contain the word "corp" "Corp.," "Inc.," or Co.," or the designation "Corp.," "Inc. word "chartered," "professional association," or the abbrevi	," or "Co	o". A professi				
B. Enter new principal office address, if applicable: (Principal office address MUST BE A STREET ADDRESS)			··-·-		
						
C. Enter new mailing address, if applicable:					2013	
(Mailing address <u>MAY BE A POST OFFICE BOX</u>)						· · · · · · · · · · · · · · · · · · ·
					,	ن
D. If amending the registered agent and/or registered officers.	ce address	s in Florida, e	nter the na	me of the		1:3 1:06
new registered agent and/or the new registered office a	address:					Q
Name of New Registered Agent						0,
	orida street					
	oriaa sireet	adaress)				
New Registered Office Address;	(Ci			_, Florida	(Zip Code)	
					,	
New Registered Agent's Signature, if changing Registered I hereby accept the appointment as registered agent. I am fai	Agent:	h and account th	n ahligatin	re of the no	eitiaa.	
and the second s	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	i ana accept to	ic omgann	is of the po.	11110711.	
	<i>**</i>	istered Agent	- 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.

Example: X Change	<u>PT</u>	John De	ne	
X Remove	<u>V</u>	Mike Jo	ones	
X Add	<u>sv</u>	Sally Sr	nith	
Type of Action (Check One)	<u>Title</u>		Name	<u>Addres</u> s
1) Change	VP		ALBERTO GARCIA	12401 SW 187 TERRACE
X Add		_		MIAMI, FL 33177
Remove				
2) Change		_		
Add				
Remove				
3) Change		_		
Add				
Remove				
4) Change	 	_		
Add				
Remove				
5) Change		_		
Add				
Remove				
6) Change		_		
Add				
Remove				

If amending or adding additional Arti Attach additional sheets, if necessary).	(Be specific)
	· <u> </u>
	<u>-</u>
<u> </u>	
	
If an amendment provides for an exch	nange, reclassification, or cancellation of issued shares,
(if not applicable, indicate N/4)	ndment if not contained in the amendment itself:
(i) in appretant, martine, way	
 	
	•
	
<u> </u>	

	08/06/2019	
The date of each amendment(s) adoption date this document was signed.	n:	if other than
Effective date if applicable:		_
	(no more than 90 days after amendment file date)	
Note: If the date inserted in this block d document's effective date on the Department	oes not meet the applicable statutory filing requirements, this date went of State's records.	ill not be listed as
Adoption of Amendment(s)	(CHECK ONE)	
■ The amendment(s) was/were adopted b by the shareholders was/were sufficien	y the shareholders. The number of votes east for the amendment(s) t for approval.	
	by the shareholders through voting groups. The following statement oring group entitled to vote separately on the amendment(s):	
"The number of votes cast for the	amendment(s) was/were sufficient for approval	
by	(voting group)	
	(voting group)	
☐ The amendment(s) was/were adopted b action was not required.	y the board of directors without shareholder action and shareholder	
☐ The amendment(s) was/were adopted b action was not required.	y the incorporators without shareholder action and shareholder	
08/06/2019 Dated		
Signature	HW)	
-	, president or other officer - if directors or officers have not been	
	n incorporator – if in the hands of a receiver, trustee, or other court uciary by that fiduciary)	
арронней по	actary by that reductary)	
KATI	ERIN FLORES	
	(Typed or printed name of person signing)	
PRES	IDENT	
 -	(Title of person signing)	

the

the