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## COVER LETTER

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	COVERCIALISM
TO: Amendment Section Division of Corporations	
THE STATE OF THE S	FENIX CI INC
NAME OF CORPORATION:  DOCUMENT NUMBER:	<del>-</del>
DOCUMENT NUMBER:	
The enclosed Articles of Amendment and fee are sub	omitted for filing.
Please return all correspondence concerning this mat	ter to the following:
	OSCAR R. BOADA CUEVAS
	Name of Contact Person
	FENIX CJ INC
	Firm/ Company
	18328 NW 68 AVE, APT L
	Address
	HIALEAH, FLORIDA 33015
	City/ State and Zip Code
	fenixcjmianii@gmail.com
E-mail address: (to be us	ed for future annual report notification)
For further information concerning this matter, pleas	se call: (1997)
OSCAR R. BOADA CUEVAS	at ( Area Code & Daytime Telephone Number
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:
\$35 Filing Fee S43.75 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

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## Articles of Amendment to Articles of Incorporation

## FILED

Articles of Incorporation of

2018 AUG 14 PM 1:13

F	ENIX CJ INC CDOORTE DIA OF OTA
(Name of Corporation as c	urrently filed with the Florida Dept. of State ONLIAN! UP STA
P	16000014541
(Document Nu	mber of Corporation (if known)
ursuant to the provisions of section 607.1006, Florida Statut s Articles of Incorporation:	es, this Florida Profit Corporation adopts the following amendment(s) t
If amending name, enter the new name of the corporat	ion:
	The new
ame must be distinguishable and contain the word "cor Corp.," "Inc.," or Co.," or the designation "Corp," "Inc ord "chartered," "professional association," or the abbrev	poration," "company," or "incorporated" or the abbreviation ;," or "Co". A professional corporation name must contain the nation "P.A."
	18328 NW 68 AVE, APT L
. Enter new principal office address, if applicable: Principal office address <u>MUST BE A STREET ADDRESS</u>	) HIALEAH, FL 33015
. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)	18328 NW 68 AVE, APT L
(maning analysis many many many many many many many many	HIALEAH, FL 33015
	· · · · · · · · · · · · · · · · · · ·
. If amending the registered agent and/or registered off	ice address in Florida, enter the name of the
new registered agent and/or the new registered office	
Name of New Registered Agent OS	SCAR R. BOADA CUEVAS
	18328 NW:68 AVE, APT L
	lorida street address)
New Registered Office Address:	HIALEAH Florida 33015
Non Hoggin of Salar	(City) (Zip Code)
New Registered Agent's Signature, if changing Registere hereby accept the appointment as registered agent. I am f	d Agent: amiliar with and accept the obligations of the position.
	773.0

Signature of New Registered Agent, if changing

 $\label{eq:continuous} \chi_{\rm cont} = \chi_{\rm cont} (X_{\rm cont}) \qquad \qquad \chi_{\rm cont} = \chi_{\rm cont} (X_{\rm cont}) \qquad \qquad \chi_{\rm cont} = \chi_{\rm cont} (X_{\rm cont}) \qquad \qquad \chi_{\rm cont} = \chi_{\rm cont} = \chi_{\rm cont} (X_{\rm cont}) \qquad \qquad \chi_{\rm cont} = \chi_{\rm cont} =$ 

Page 1 of 4

address of each Officer (Attach additional sheets Please note the officer/di P = President; V= Vice Executive Officer; CFO held. President, Treusure Changes should be noted a change, Mike Jones led Mike Jones, V as Remove	and/or D , if necess rector titl President = Chief I er, Directo I in the fo aves the c	ary)  by the first letter of the office title.  T= Treasurer; S= Secretary; D= Director; TR= Trustee; C = Chairman or Clerk; CEO = Chief inancial Officer. If an officer/director holds more than one title, list the first letter of each office r would be PTD.  lowing manner. Currently John Doe is listed as the PST and Mike Jones is listed as the V. There is proporation, Sally Smith is named the V and S. These should be noted as John Doe, PT as a Change,
Example: <u>X</u> Change	<u>PT</u>	John Doe
X Remove	<u>Y</u>	Mike Jones
_X Add	<u>sv</u>	<u>Sally Smith</u>
Type of Action (Check One)	<u>Title</u>	Name Address
(Check Onle)  X Change	MGR	CARLOS J. CARRENO ESTUPINA . : . : . : . : . : . : . : . : . : .
Add	_	HIALEAH, FL 33015
Remove		And the second s
<u> </u>	MGR	MYRIAM P. VALENCIA ORTIZ 18328 NW AVE, APT L
2) X Change		HIALEAH, FL 33015
Add		
Remove	P	OSCAR R. BOADA CUEVAS 18328 NW 68 AVE, APT L
3) Change		HIALEAH, FL 33015
Add		
Remove		
4) Change		
Add		
Remove		
Change		
5) Change		
Add		
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⊕ Change		<u> </u>

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\_\_ Add

\_ Remove

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	n de Constante
an amendment provides for an exchan	ge, reclassification, or cancellation of issued shares, ment if not contained in the amendment itself:
provisions for implementing the amend	
orovisions for implementing the amend (if not applicable, indicate N/A)	
provisions for implementing the amend	·
provisions for implementing the amend	

•	08-10-2018	, if other than the
The date of each amendment(s) adopti	on:	, If Other than the
date this document was signed.	08-10-2018	
Effective date if applicable:	(no more than 90 days after amendment file date)	
process of the same of the sam	(no more than 90 days after amendment file date)	
Note: If the date inserted in this block document's effective date on the Departs	does not meet the applicable statutory filing requirements, this nent of State's records.	date will not be listed as the
Adoption of Amendment(s)	( <u>CHECK ONE</u> )	
The amendment(s) was/were adopted by the shareholders was/were suffici	by the shareholders. The number of votes east for the amendme ent for approval.	nt(s)
☐ The amendment(s) was/were approve must be separately provided for each	ed by the shareholders through voting groups. The following state h voting group entitled to vote separately on the amendment(s):	ement
	he amendment(s) was/were sufficient for approval	
by	(voting group)	
	(voting group)	
action was not required.	I by the board of directors without shareholder action and shareholder action and shareholder action and shareholder	
action was not required.		
08-10-2018		
Dated	シャナララ ツー・シー	
selected, b	tor, president or other officer – if directors or officers have not by an incorporator – if in the hands of a receiver, trustee, or other fiduciary by that fiduciary)	court
	OSCAR R. BOADA CUEVAS.	
_	(Typed or printed name of person signing)	
	PRESIDENT	
	(Title of person signing)	

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