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Division of Corporations

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From:

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Account Number : I20130000083 : (305)359-3700 : (786)217-1243 Phone

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Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please.

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COR AMND/RESTATE/CORRECT OR O/D RESIGN CIA-SEAFOOD BEST INC.

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June 5, 2019

FLORIDA DEPARTMENT OF STATE

Division of Corporations

CIA-SEAFOOD BEST INC. 1000 BRICKELL AVENUE, SUITE 300 MIAMI, FL 33131

SUBJECT: CIA-SEAFOOD BEST INC.

REF: P16000014802

We received your electronically transmitted document. However, the document has not been filed. Please make the following corrections and refax the complete document, including the electronic filing cover sheet.

The registered agent must sign accepting the designation.

If you have any questions concerning the filing of your document, please call (850) 245-6838.

Cheryl R McNair Regulatory Specialist II

FAX Aud. #: H19000177523 Letter Number: 819A00011208

	Articles of An	oendment	- 13 17
	to Articles of Inco	rporation	(((।।१००० मन्त्रकेष ३)))
	of	-	
CIA-SEAFOOD BEST INC.			2019 JUH -5 A II: H.H.
(Name o	of Corporation as currently	filed with t	the Florida Dept. of State)
P16000014802			ALASTE FLAME
	(Document Number of	Corporation	(ifknown)
Pursuant to the provisions of section 607. its Articles of Incorporation:	1006, Florida Statutes, this F	lorida Profi	it Corporation adopts the following amendment(s
A. If amending name, enter the new na	me of the corporation:		
			The new
name must be distinguishable and con "Corp.," "Inc.," or Co.," or the design word "chartered," "professional associa	nation "Corp," "Inc," or "C	Co". A proj P.A."	ry," or "incorporated" or the abbreviation fessional corporation name must contain the
B. Enter new principal office address,	if applicable:	1000 BK	CICKELL AVENUE, SUITE 300
(Principal office address MUST BE A S		MIAMI,	FL 33131
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)		1000 BR	CICKELL AVENUE, SUITE 300
(maining andress MAI 100 A 1 001	<u>011765 box</u>)	MIAMI,	FL33131
D. If amending the registered agent ar			da, enter the name of the
new registered agent and/or the new	w registered office address: RCA FINANCIAL HOLD		
Name of New Nexistered Agent	1000 BRICKELL AVENU	E, SUITE 3	00
	(Florida stre	et address)	
New Registered Office Address:	MIAMI		33131 , Florida
tee hexistered Office Madress.		Ciry)	(Zip Code)
	(
New Registered Agent's Signature, if c	hlunging Registered Agent:	\bigvee	
I hereby accept the appointment as regist		it and acce	ept the obligations of the position.
and the state of t	Signature of New Re	egistered Ag	ent, if changing
4			((C419000177520))

06/5/2019

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:

(Astuch additional sheets, if necessary)

Please note the officeridirector 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 us an Add.

Example: X Change	PI	John Doc	
X Remove	Ā	Mike Jones	
_X Add	<u>\$Y</u>	Saily Smith	
Type of Action (Check Oue)	<u>Tills</u> P	Name rca financial holdings li.c	Address 1000 BRICKELL AVENUE SUITE 300
Change X Add			MIAMI, FL 33131
Remove	MGR	FLORES AZUA, REBECA	1000 BRICKE L. AVENUE, \$51.718 100
2)Change			MIAMI, FL 33131
Remove 3)Change	מיט	CEPEDA, RENZZO	495 BRICKELL AVE SUITE 2-4002
X Remove			MIAMI, FL 33131
4)Change			
Remove			49
5) Change Add			
Remove			
6) Change			
Remove			

	(((HIPOSO 174 523 3)))
amending or adding additional Articles, enter change(s) bere:	
Attach additional sheets, if necessary). (Be specific)	
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05/21/2019	
The date of each amendment(s) adoption:	if other then the
date this document was signed. 05/21/2019	
Effective date if applicable:	
(no more than 90 days after amendment file date)	
Note: If the date inserted in this block does not rocet the applicable statutory filing requirements, this date will document's effective date on the Department of State's records.	not be listed as the
Adoption of Amendment(s) (CHECK ONE)	
☐ The amendment(s) was/were adopted by the shareholders. The number of votes east for the amendment(s) by the shareholders was/were sufficient for approval.	
The amendment(s) was/were approved by the shareholders through voting groups. The following statement must be separately provided 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	
(voting group)	
The amendment(s) was/were adopted by the board of directors without shareholder action and shareholder action was not required	
☐ The amendment(s) was/were adopted by the incorporators without shareholder action and shareholder	
action was not required.	
05/21/3019	
Dated	
Signature (1/10)	
Signature (By a directive president or other officer - if directors or officers have not been	
selected by in incorporator - if in the hands of a receiver, trustee, or other court	
special fiduciary by that fuluciary)	
REBECA FLORES	
(Typed or printed name of person signing)	
DIRECTOR	
(Title of person signing)	
Coch idos un	B
	(50 5 30)