P16000024566

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COVER LETTER

TO: Amendment Section Division of Corporations

NAME OF CORPO	RATION: SUPRO MIAMI C	ORP	
DOCUMENT NUM	P16000024566		
The enclosed Articles	of Amendment and fee are su	bmitted for filing.	
Please return all corre	spondence concerning this ma	tter to the following:	
	ISAAC ESPINOZA RAMIF	REZ	
		Name of Contact Person	1
	SUPRO MIAMI CORP		
		Firm/ Company	
	8950 SW 74 CT SUITE 220	I A-58	
•		Address	
	MIAMI, FL 33156		
		City/ State and Zip Cod	e
ISAA	C0100@HOTMAIL.COM		
	E-mail address: (to be us	sed for future annual report	notification)
For further informatio	n concerning this matter, pleas	786	310-9492
Name	of Contact Person	at (at Co)de & Daytime Telephone Number
	r the following amount made	•	•
\$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)
Am Div P.O	iling Address endment Section ision of Corporations . Box 6327 ahassee, FL 32314	Ameno Divisio Clifton 2661 E	Address Iment Section on of Corporations Building Executive Center Circle

Articles of Amendment to Articles of Incorporation of

SUPRO MIAMI CORP			
(Name o	of Corporation as current	ly filed with the Florida Dept. o	f State)
P16000024566			
	(Document Number of	f Corporation (if known)	
Pursuant to the provisions of section 607. its Articles of Incorporation:	1006, Florida Statutes, this	Florida Profit Corporation adop	ts the following amendment(s) to
A. If amending name, enter the new na	me of the corporation:		
			The new
name must be distinguishable and cons "Corp.," "Inc.," or Co.," or the design word "chartered," "professional associa	ation "Corp," "Inc." or "	'Co". A professional corporation	on name must contain the
B. Enter new principal office address, (Principal office address MUST BE A S	if applicable:		700 M -10
(Trincipal office address MOST BE 715	REET ADDRESS /	MIAMI, FL 33156	当り
			See on
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)		8950 SW 74 CT SUITE 2201	A-58 PS :
		MIAMI, FL 33156	器 2
D. If amending the registered agent an new registered agent and/or the new			of the
Name of New Registered Agent	ISAAC ESPINOZA RAN	MREZ	·
	8950 SW 74 CT SUITE 2	201 A-58	
	(Florida st	reet address)	
New Registered Office Address:	MIAMI	r	Jorida 33156
		(City)	(Zip Code)
	ı		
New Registered Agent's Signature, if c I hereby accept the appointment as regist	hanging Registered Agen ered agent. I am familiar	<u>t:</u> with and accept the obligations o	f the position.
Iso	ac Espiring	CREGISTERED Agent, if changing	
	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 Doe	
X Remove	<u>V</u>	Mike Jones	
X Add	<u>sv</u>	Sally Smith	
Type of Action (Check One)	<u>Title</u>	Name	<u>Addres</u> s
1) Change			
Add			
Remove			
2) Change	~~~		
Add			
Remove			
3) Change			
Add			
Remove			
4) Change		•	
Add			
Remove			
6) (1)			
5) Change			
Add			
Remove			
6) Change			
Add			
Remove			

ttach additional sheets, if necessary).	(Be specific)		
			·-··
			<u> , , </u>
			<u></u>
an amendment provides for an exc provisions for implementing the amo	hange, reclassification, or endment if not contained it	cancellation of issued shares, n the amendment itself:	
(if not applicable, indicate N/A)			
<u>, , , , , , , , , , , , , , , , , , , </u>			
		<u> </u>	

The date of each amendment(s) add date this document was signed.	option:, it other than to
Effective date if applicable:	
	(no more than 90 days after amendment file date)
Note: If the date inserted in this blo document's effective date on the Department.	ock does not meet the applicable statutory filing requirements, this date will not be listed as the artment of State's records.
Adoption of Amendment(s)	(<u>CHECK ONE</u>)
☐ The amendment(s) was/were adop by the shareholders was/were suff	ted by the shareholders. The number of votes cast for the amendment(s) ficient for approval.
	oved by the shareholders through voting groups. The following statement ach voting group entitled to vote separately on the amendment(s):
	or the amendment(s) was/were sufficient for approval
by	(voting group)
	(voting group)
action was not required.	oted by the board of directors without shareholder action and shareholder
The amendment(s) was/were adopt action was not required.	oted by the incorporators without shareholder action and shareholder
Dated_09	14/16
	rector, president or other officer – if directors or officers have not been, by an incorporator – if in the hands of a receiver, trustee, or other court
appointe	ed fiduciary by that fiduciary)
-	Tayla A Corte's Redondo (Typed or printed name of person signing)
-	President
	(Title of person signing)