Division of Corporations Electronic Filing Cover Sheet

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(((H16000092258 3)))



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To:

Division of Corporations

Fax Number

: (850)617-6380

From:

Account Name : ARAZOZA & FERNANDEZ-FRAGA P.A.

Account Number : 076624003440 Phone : (305)444-6226

Fax Number : (305)442-4829

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

Email	Address:				
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# COR AMND/RESTATE/CORRECT OR O/D RESIGN INTELLINVESTMENTS, INC

Certificate of Status	1
Certified Copy	0
Page Count	05
Estimated Charge	\$43.75

APR 1-4 2016

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Corporate Filing Menu

Help

Tallahassee, FL 32301

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## **COVER LETTER**

Division of Corpo				
NAME OF CORPOR	ATION: INTELLINVES	TMENTS, INC		
DOCUMENT NUME	P16000028294			
The enclosed Articles	of Amendment and fee are s	ubmitted for filing,		
Please return all corres	pondence concerning this ma	atter to the following:		
		LAURA KOHN	<u>_</u>	
		Name of Contact Person	0	
	ARAZ	zoza & fernandez-fi	RAGA P.A.	
•	· · · · · · · · · · · · · · · · · · ·	Firm/ Company		
	2100	SALZEDO STREET, SU	ITB 300	
•		Address		
	i	CORAL GABLES, FL 33	134	
•		City/ State and Zip Cod	g	
		LAURA@ARAZOZA.CO	ОМ	
<u></u>	E-mail address: (to be us	sed for future ennual report	notification)	
For further information	concerning this matter, please	se call:		
LAURA KOHN		at (	444-6226 × 233	
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	riment of State:	
S35 Filing Fee	■\$43.75 Filing Fee & Certificate of Status	Cl\$43.75 Filing Fee & Certified Copy (Additional copy is enclosed)	☐\$52.50 Filing Fee Certificate of Status Certified Copy (Additional Copy is enclosed)	
Mait	ng Address	Street	Address	
	dment Section	Amend	ment Section	
	ion of Corporations	Division of Corporations		
= -	Box 6327	Clifton Building		
រខានេ	hassee, FL 32314	2661 Executive Center Circle		

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Articles of Amendment to
Articles of Incorporation of

	OT	
	INTELLINVESTMENTS, INC	
(Мате	of Corporation as carrently filed with the FI	orida Dept. of State)
	P16000028294	
	(Document Number of Corporation (if kr	nown)
Pursuant to the provisions of section 607 its Articles of Incorporation:	.1006, Florida Statutes, this Florida Profit Cor	poration adopts the following amendment(s) to
A. If amending name, enter the new a	ame of the corporation;	16 AP
name must be distinguishable and con "Corp.," "Inc.," or Co.," or the design word "chartered," "professional associa	tain the word "corporation," "company," o nation "Corp," "Inc," or "Co". A profession uton," or the abbreviation "P.A."	nal corporation name must contain the
B. Enter new principal office address.	if anniethle:	
(Principal office address MUST BE A S		S 25
D. If amending the registered agent an asw registered agent and/or the new Name of New Registered Agent	d/or registered office address in Florida, ent v registered office address; ARAZOZA & FERNANDEZ-FRAGA P.A. 2100 SALZEDO STREET, SUITE 300	er the name of the
	(Florida street address)	
New Registered Office Address.	CORAL GABLES	
New Registered Avent's Signature, if cl I hereby accept the appointment as registe	sanging Registered Agent: ered agent. I am familiar with and accept the a Signature of New Registered Agent, if a	16 L

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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: XChange	PI	John D	<u>oe</u>		
X Remove	¥	Mike Jo	DIES		
X Add	<u>sv</u>	Sally S	mith		
Type of Action (Check One)	Title		<u>Name</u>		Address
1) Change		_	*****	<del></del>	
Add					
Remove					
2) Change					
Add		_		 <del></del>	
Remove					·
3) Change		<del></del>	<del></del>	 _	- 14 <del>4</del> 1 <del>74</del> 411
A¢d					
Remove					
4) Change		_		_	
Add		•			
Remove					
5) Change	<del></del>	_		 ···	
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δ)Change		-		 <u></u> ,	/
Add					
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rovisions for i	nt provides for an implementing the icable, indicate N/A	amendment if not :	contained in the am	endment itsett:	
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	APRIL 8/2018 102	
The date of each amendment(s) as date this document was signed.	loption:	, if other than the
Effective date if applicable:		
	(no more than 90 days after amendment file date)	
Note: If the date inserted in this bedocument's effective date on the De	lack does not meet the applicable statutory filing requirements, this date will partment of State's records.	I not be listed as the
Adoption of Amendment(s)	(CHECK ONE)	
The amendment(s) was/were ado by the shareholders was/were su	pted by the shareholders. The number of votes cast for the amendment(s) fficient for approval.	
The amendment(s) was/were app must be separately provided for	roved by the shareholders through voting groups. The following statement 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	49	
	(voting group)	
The amendment(s) was/were ado action was not required.	pted by the board of directors without shareholder action and shareholder	
The amendment(s) was/were ado action was not required.	pted by the incorporators without shareholder action and shareholder	
APRIL 8,	2016	
Signature	The state of the s	
selected	rector, president or other officer - if directors or officers have not been i, by an incorporator - if in the hands of a receiver, trustee, or other court ed fiduciary by that fiduciary)	<del>-</del> .
	REINALDO SEQUERA	
•	(Typed or printed name of person signing)	<del></del>
	DIRECTOR	
_	(Title of person signing)	