P16CCCCC3646C

(Re	equestor's Name)	
(Ac	ddress)	
(Ac	ldress)	
(Cit	ty/State/Zip/Phon	e #)
PICK-UP	☐ WAIT	MAIL
(Bu	usiness Entity Nar	me)
(Do	ocument Number)	
Certified Copies	Certificate:	s of Status
Special Instructions to	Filing Officer:	
WIDO	DIMP	1195
_	Office Use On	IIIy Wat T



000354792600

11/12/20--01022--030 **35.00

21 IAN II PH IS GO

Owend/ Come Changl

F22 0 a 2221

D CUSHING

COVER LETTER

Division of Corporations	
NAME OF CORPORATION: ZULAY & Carvajal PA DOCUMENT NUMBER: P 160000 36460	
DOCUMENT NUMBER: V 160000 36460	
The enclosed Articles of Amendment and fee are submitted for filing.	
Please return all correspondence concerning this matter to the following:	
Zulay Carvajal Name of Contact Person	
Zulay E Carvajal PA Firm/Company	
5149 Tena Vista Way	
Address	
Orlando FL, 32837 City/ State and Zip Code	
City/ State and Zip Code	
Zulay 964 a g mail. Com E-mail address: (to be used for future annual report notification)	27 384 1
	ارند بخر <u> </u>
For further information concerning this matter, please call:	•
Zulay Carvajal at 407 595-8382 Name of Contact Person Area Code & Daytime Telephone Number	94 - 49 84 - 49 87 - 49
Enclosed is a check for the following amount made payable to the Florida Department of State:	-
\$35 Filing Fee Certificate of Status Certified Copy (Additional Copy cnclosed) \$43.75 Filing Fee (Additional Copy (Additional	

Mailing Address

TO: Amendment Section

Amendment Section Division of Corporations P.O. Box 6327

Tallahassee, FL 32314

Street Address

Amendment Section Division of Corporations The Centre of Tallahassee 2415 N. Monroe Street, Suite 810 Tallahassee, FL 32303

is enclosed)



2021 1 1 1 1 8: 33

FLORIDA DEPARTMENT OF STATE Division of Corporations

December 17, 2020

ZULAY CARVAJAL 5149 TERRA VISTA WAY ORLANDO, FL 32837

SUBJECT: ZULAY E CARVAJAL PA

Ref. Number: P16000036460

We have received your document and check(s) totaling \$35.00. However, the enclosed document has not been filed and is being returned to you for the following reason(s):

Please check the appropriate box on the amendment form regarding the adoption of the amendment(s).

If the corporation is a <u>PROFIT</u> corporation it must be signed by a director, president or other officer - if directors or officers have not been selected, by an incorporator - if in the hands of a receiver, trustee, or other court appointed fiduciary, by that fiduciary.

The name and title of the person signing the document must be noted beneath or opposite the signature.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6050.

Querida R Moore Regulatory Specialist II

Letter Number: 720A00025637

www.sunbiz.org

Division of Communities - D.O. DOV 0007 Melleleness - Electron 0001

Articles of Amendment

to

Articles of Incorporation

of

20104 E Varvalal PA	
(Name of Corporation as currently filed with the Florida Dept. of State)	_
(Document Number of Corporation (if known)	
(Document Number of Corporation (if known)	_
Pursuant to the provisions of section 607.1006, Florida Statutes, this <i>Florida Profit Corporation</i> adopts the following amendment(s) its Articles of Incorporation:	to
A. If amending name, enter the new name of the corporation:	
ZUlay Carvajal Tharra DA The new mame must be distinguishable and contain the word "corporation," "company," or "incorporated" or the abbreviation "Corp.,"	
name must be distinguishable and contain the word "corporation," "company," or "incorporated" or the abbreviation "Corp.," "Inc.," or Co.," or the designation "Corp," "Inc," or "Co". A professional corporation name must contain the word "chartered," "professional association," or the abbreviation "P.A."	
B. Enter new principal office address, if applicable: 5149 Terra Vista Way	
(Principal office address MUST BE A STREET ADDRESS)	
	
C. Enter new mailing address, if applicable:	
(Mailing address MAY BE A POST OFFICE BOX)	
D. If amending the registered agent and/or registered office address in Florida, enter the name of the	·
new registered agent and/or the new registered office address:	27
Name of New Registered Agent Zulay Carvajal Ibarra II	⊋ ⊂
	い 三
5149 Terror Vista Way (Florida street address)	5
New Registered Office Address: Ollando Florida 32837	
(City) (Zip Code)	
New Registered Agent's Signature, if changing Registered Agent: I hereby accept the appointment as registered agent. I am familiar with and accept the obligations of the position.	
Tentreed	
Signature of Yew Registered Agent, if changing	

Check if applicable

☐ The amendment(s) is/are being filed pursuant to s. 607.0120 (11) (e), F.S.

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)

Example:

Remove

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.

X Change	PT John Doe	
X Remove	<u>V</u> <u>Mike Jones</u>	
X Add	SV Sally Smith	
Type of Action (Check One)	<u>Title</u> <u>Name</u>	<u>Addres</u> s
1) Change	P Zulay Ca	<u>vajal Ibarra</u> 5149 Terra Vista Lua. <u>Orlando FL</u> , 32837
Add		01/2290 FC, 2582 F
Remove		
2) Change		
Add		
Remove 3) Change		
Add		
Remove		
4) Change		
Adđ		
Remove		
5) Change		
Add		
Remove		
6) Change		
Add		

	ssary). (Be specific)		
· · · · · · · · · · · · · · · · · · ·			
	.		· · · · · · · · · · · · · · · · · · ·
			<u> </u>
f an amendment provides for provisions for implementing to (if not applicable, indicate	he amendment if not cont	ion, or cancellation of is ained in the amendmen	sued shares, titself:
provisions for implementing t	he amendment if not cont	ion, or cancellation of is ained in the amendmen	sued shares, i itself:
provisions for implementing t	he amendment if not cont	ion, or cancellation of is ained in the amendmen	sued shares, titself:
provisions for implementing t	he amendment if not cont	on, or cancellation of is ained in the amendmen	sued shares, titself:
provisions for implementing t	he amendment if not cont	ion, or cancellation of is ained in the amendmen	sued shares, i itself:
f an amendment provides for provisions for implementing t (if not applicable, indicate	he amendment if not cont	ion, or cancellation of is ained in the amendmen	sued shares, i itself:
provisions for implementing t	he amendment if not cont	ion, or cancellation of is ained in the amendmen	sued shares,

The date of each amendment(s) ad date this document was signed.	option:	, if other than the
Effective date if applicable:		
	(no more than 90 days after amendment file date)	
Note: If the date inserted in this bl document's effective date on the De	ock does not meet the applicable statutory filing requirements, this date partment of State's records.	will not be listed as the
Adoption of Amendment(s)	(CHECK ONE)	
The amendment(s) was/were adoption was not required.	pted by the incorporators, or board of directors without shareholder action a	and shareholder
☐ The amendment(s) was/were ado by the shareholders was/were sul	pted by the shareholders. The number of votes cast for the amendment(s) flicient for approval.	
	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 t	for the amendment(s) was/were sufficient for approval	
by	"	
	(voting group)	
Dated	15-2021 Leugus	
Signature	Feerfiers	_
(By a di selected	rector, president or other officer – if directors or officers have not been l, by an incorporator – if in the hands of a receiver, trustee, or other court ed fiduciary by that fiduciary)	
	Zulay Carvojal Tharra (Typed or printed name of person signing)	
	President (Title of person signing)	