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17 MAY 22 PM 5: 32

SECRETARY OF SAME

MAY 2 2 2017

S. PRATHER

COVER LETTER

Division of Corporations NAME OF CORPORATION: ES CORCHE AND ASSOCIATES **DOCUMENT NUMBER:** The enclosed Articles of Amendment and fee are submitted for filing. Please return all correspondence concerning this matter to the following: CORP Address City/ State and Zip Code For further information concerning this matter, please call: Enclosed is a check for the following amount made payable to the Florida Department of State: \$35 Filing Fee □\$43.75 Filing Fee & □\$43.75 Filing Fee & □\$52.50 Filing Fee Certificate of Status Certified Copy Certificate of Status (Additional copy is Certified Copy enclosed) (Additional Copy is enclosed)

Mailing Address

TO: Amendment Section

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
Tailahassee, FL 32301

Articles of Amendment

to Articles of Incorporation

	of	_	
ESCOPCHE AND	ASSOCIATE:	5 COPP	
(Name of Corporation	as currently filed wi	th the Florida Dept. of State	ð
<u> </u>	3 <i>80</i> 98		
(Docume	ent Number of Corporat	ion (if known)	
Pursuant to the provisions of section 607,1006, Florida its Articles of Incorporation:	Statutes, this <i>Florida P</i>	rofit Corporation adopts the f	following amendment(s) to
A. If amending name, enter the new name of the cor	poration:		
N/I	7		The new
name must be distinguishable and contain the word "Corp.," "Inc.," or Co.," or the designation "Corp,' word "chartered," "professional association," or the a B. Enter new principal office address, if applicable: (Principal office address MUST BE A STREET ADD)	"Inc," or "Co". A pbbreviation "P.A."		
(Frincipal office address MUST BE A STREET ADD)	<u>(£33</u>)		
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)	AlM	FILED 17 HAY 22 PH 5: SECRETARY OF BELLEVIEW
D. If amending the registered agent and/or registered new registered agent and/or the new registered of		orida, enter the name of the	<u> </u>
Name of New Registered Agent	NA		
New Registered Office Address:	(Florida street address MA (City)	.) , Florida_	(Zip Code)
	(0.19)		(Esp Coul)
New Registered Agent's Signature, if changing Registereby accept the appointment as registered agent. I		ccept the obligations of the po	osition.
	N/A		
Signa	ture 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	Address
1) Change	ND	PENZER BADILLO	6939 Villa de
Add Remove			Octob F1,32821
2) Change			
Add			
Remove			
3) Change			
Add			
Remove			
4) Change			
Add			
Remove			
5) Change			
Add			
Remove			
6) Change		· · · · · · · · · · · · · · · · · · ·	
Add			
Damasia			

an amendment provides for an exchange, reclassification, or cancellation of issued shares, provisions for implementing the amendment if not contained in the amendment itself: (If not applicable, indicate N/A) N/A		ing additional Article eets, if necessary). (Be specific)	_,	
provisions for implementing the amendment if not contained in the amendment itself: (if not applicable, indicate N/A)			NIA		
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N/A	if not applicab	ementing the amendi le. indicate N/A)	ment it not contained	in the amendment i	iseit:
	CJ FF	,,	1114		
			NIA		
	- ***				

The date of each amendment(s) adoption:	, if other than the
Effective date <u>if applicable</u> : (no more than 90 days after amendment file date)	
(no more than 90 days after amenament fite date)	
Note: If the date inserted in this block does not meet 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 cast 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"	
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.	FIL (
Dated 1)5 19 2017 Signature Ruffunds	PH 5: 32
(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)	
Renzer Marcony Badillo Chacon	
(Typed or printed name of person signing)	
<u>VP</u>	
(Title of person signing)	