## P16000039362

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## **COVER LETTER**

TO: Amendment Section

Division of Corporations NAME OF CORPORATION: DOCUMENT NUMBER: 7/600039362 The enclosed Articles of Amendment and fee are submitted for filing. Please return all correspondence concerning this matter to the following: Address E-mail address: (to be justed for future angual report notification) For further information concerning this matter, please call: Fabiola Area Code & Daytime Telephone Number Name of Contact Person 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** Street Address Amendment Section Amendment Section Division of Corporations Division of Corporations P.O. Box 6327 Clifton Building Tallahassee, FL 32314 2661 Executive Center Circle

Tallahassee, FL 32301

BIII SER S IM 9: 23

## Articles of Amendment Articles of Incorporation

MISS SW. (Name of Corporation as currently filed with the Florida Dept. of State) (Document Number of Corporation (if known) Pursuant to the provisions of section 607.1006, Florida Statutes, this Florida Profit Corporation adopts the following amendment(s) to its Articles of Incorporation: A. If amending name, enter the new name of the corporation: 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". 4 professional corporation name must contain the word "chartered," "professional association," or the abbreviation "P.A." B. Enter new principal office address, if applicable: (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: Name of New Registered Agent (Florida street address) New Registered Office Address: (City) 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. Signature of New Registered Agent, if changing

address of each Officer a (Attach additional sheets, Please note the officer/dir P = President; V= Vice I Executive Officer; CFO = held. President, Treasurer Changes should be noted	and/or D if necess vector title President = Chief F r, Directo in the fol ves the co	irector being ary)  or by the first let  T = Treasurer  inancial Office  or would be PT  lowing manner  orporation, Sal	dded:	Trustee; C = Chairman or Clerk; CEO = Chiefe than one title, list the first letter of each office e PST and Mike Jones is listed as the V. There is a should be noted as John Doe, PT as a Change,
X Add	<u>sv</u>	Sally Smith		
Type of Action (Check One)	<u>Title</u>	<u>Nam</u>	<u>e</u>	<u>Addres</u> s
1) Change Add Remove	<u></u>	<u> </u>	liriela Acosta	895 W 39 PL HIALEAH, FL 33012
2) Change Add Remove 3) Change Add				
Remove  4) Change Add Remove				
5) Change Add Remove				
6) Change Add Remove	-			-

. <u>If amending or adding additional Articl</u>	es, enter change(s) here:
(Attach additional sheets, if necessary).	(Be specific)
N/A	
	<u>.                                     </u>
	<u> </u>
	II
If an amendment provides for an excha	nge reclassification, or cancellation of issued shares, dment if not contained in the amendment itself:
(if not applicable, indicate N/A)	
N/A	
1.50./	
	<u> </u>
	II

The date of each amendment(s) adoption: $\frac{08/15/2017}{}$	, if other than the
date this document was signed.	
Effective date if applicable:	
(no more than 90 days after amendment file date)	_
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.	
21-10	
Dated 08/15/17	
Signature (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)	
YOKAMY MARTINEZ	
(Typed or printed name of person signing)	_
PRESIDENT	_
(Title of person signing)	