## P16000052804

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## **COVER LETTER**

**TO:** Amendment Section Division of Corporations

NAME OF CORPOR	ATION: AVOICE	a Cabrera	P.A	
DOCUMENT NUMB	er: <u>P16000</u>	052804		
The enclosed Articles of	of Amendment and fee are sub	omitted for filing.		
Please return all corres	pondence concerning this mat	ter to the following:		
	Amar	oa Cabrera		
-	111011	Name of Contact Person	·····	
		Firm/ Company		
-	950 NE 12 ave #106			
	Address			
	Hallandale +L 33009			
		City/ State and Zip Code	<b>;</b>	
	Vbortele	valuod.cam		
E-mail address: (to be used for future annual report notification)				
For further information	o concerning this matter, pleas	e call:		
	Cabrera	at (305	43/6566	
Name o	of Contact Person	Area Coo	le & Daytime Telephone Number	
Enclosed is a check for the following amount made payable to the Florida Department of State:				
\$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)	
Mailing Address Amendment Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314		Amend Divisio The Ce	Address ment Section n of Corporations entre of Tallahassee J. Monroe Street, Suite 810	

Tallahassee, FL 32303

## **Articles of Amendment**

to

## Articles of Incorporation of

Andrea Cabre	ra PA	
(Name of Corporation as currently	filed with the Florida Dept. of	State)
P1600009	52804	
(Document Number of	Corporation (if known)	
Pursuant to the provisions of section 607.1006, Florida Statutes, this <i>F</i> its Articles of Incorporation:	Florida Profit Corporation adopts	the following amendment(s) to
A. If amending name, enter the new name of the corporation:		
Andrea Cabren	a Inc	The new
name must be distinguishable and contain the word "corporation," "co "Inc.," or Co.," or the designation "Corp," "Inc," or "Co". A "chartered," "professional association," or the abbreviation "P.A."		
B. Enter new principal office address, if applicable: (Principal office address MUST BE A STREET ADDRESS)	N/A	70.
C. Enter new mailing address, if applicable:		25.
(Mailing address MAY BE A POST OFFICE BOX)	N/A	
		<u>ა</u>
D. If amending the registered agent and/or registered office address:  new registered agent and/or the new registered office address:		the
Name of New Registered Agent  Name of New Registered Agent		
<u> </u>		<del></del>
(Florida stre	ret address)	
New Registered Office Address:		rida
	City)	(Zip Code)
New Registered Agent's Signature, if changing Registered Agent: I hereby accept the appointment as registered agent. I am familiar w	ith and accept the obligations of t	he position.
1		
NA	gistered Agent, if changing	<del>.</del>
Signature of New Re	egistered Agent, if changing	

Check if applicable

<sup>☐</sup> 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:

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	<u>PT</u>	John Doe	
X Remove	<u>v</u>	Mike Jones	
X Add	<u>\$V</u>	Sally Smith	
Type of Action (Check One)	<u>Title</u>	<u>Name</u>	Address
i) Change			
Add		,	<del></del>
Remove			
2) Change	-		
Add			
Remove 3) Change			
Add			
Remove			
4) Change			
Add			
Remove			
5) Change			
Add			
Remove			
6) Change			
Add			
Remove			

Attach additional shee	g additional Articles, ent ets, if necessary). (Be sp	ter change(s) here: ecific)		
Amendino	<b>\</b> :			
Afficle 3	- Any an	d all lega	1 Business	
		0		
			<del> </del>	
		11-1		
		<del></del>		
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<del></del>		<u></u>		
		· .		
f an amendment pro provisions for imple (if not applicable	ovides for an exchange, rementing the amendment c, indicate N/A)	eclassification, or can if not contained in th	ncellation of issued share ne amendment itself:	<u>es,</u>
		~		

The date of each amendment(s) ad	option:	, if other than the
date this document was signed.		
Effective date <u>if applicable</u> :	(no more than 90 days after amendment file	
	(no more than 90 days after amenament file	aaie)
Note: If the date inserted in this bl document's effective date on the Dep	ock does not meet the applicable statutory filing require artment of State's records.	ements, this date will not be listed as the
Adoption of Amendment(s)	(CHECK ONE)	
The amendment(s) was/were adopaction was not required.	sted by the incorporators, or board of directors without s	hareholder action and shareholder
☐ The amendment(s) was/were adop by the shareholders was/were suf	eted by the shareholders. The number of votes cast for the ficient for approval.	ne amendment(s)
	oved by the shareholders through voting groups. The foach voting group entitled to vote separately on the amer	
"The number of votes cast f	or the amendment(s) was/were sufficient for approval	
by	(voting group)	
	(voting group)	
Dated/	1/17/21	
Signature		
(By a din selected	ector, president or other officer – if directors or officers by an incorporator – if in the hands of a receiver, truste d fiduciary by that fiduciary)	
-	And 100 Captera (Typed or printed name of person signing)	
-	President-	
	(Title of person signing)	

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