P16000056160

(Requestor's Name)				
(Address)				
(Address)				
(Address)				
(City/State/Zip/Phone #)				
PICK-UP WAIT MAIL				
(Business Entity Name)				
(Datiness Entry Name)				
(Document Number)				
Certified Copies Certificates of Status				
Special Instructions to Filing Officer:				
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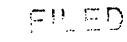
00/29/2021 JH

2021 HAY 24 PH 8: 52

COVER LETTER

TO: Amendment Section Division of Corporations

NAME OF CORPOR	ATION: LIZT LTM CENT	ER, INC			
DOCUMENT NUME					
	of Amendment and fee are su	bmitted for filing.			
Please return all corres	pondence concerning this ma	tter to the following:			
	TAMARA COLLADO				
		Name of Contact Perso	on		
	LIZT LTM CENTER, INC				
		Firm/ Company			
	9800 CRIBBEAN BLVD				
		Address			
_	CUTLER BAY, FL 33189				
		City/ State and Zip Coo	de		
	liztltmcenter@gmail.com				
	E-mail address: (to be us	sed for future annual repor	t notification)		
For further information	concerning this matter, pleas				
TAMARA COLLADO		at (968 3011 ode & Daytime Telephone Number		
Name o	f Contact Person	Area Co	ode & Daytime Telephone Number		
Enclosed is a check for	the following amount made	payable to the Florida Dep	partment 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)		
Ame Divis P.O.	ing Address ndment Section sion of Corporations Box 6327 hassee, FL 32314	Amen Divisi The C 2415	dment Section on of Corporations Centre of Tallahassee N. Monroe Street, Suite 810 passee, FL 32303		



Articles of Amendment Articles of Incorporation 2021 HAY 24 PM 8: 53

LIZT LTM CENTER, INC

SECRETARY SESTA

		<u> </u>	···,
(Name o	of Corporation as curren	tly filed with the Florida D	Dept. of State)
P16000056160			
	(Document Number	of Corporation (if known)	
Pursuant to the provisions of section 607. its Articles of Incorporation:	1006, Florida Statutes, thi	s Florida Profit Corporation	n adopts the following amendment(s) to
A. If amending name, enter the new na	ume of the corporation:		
N/A			The new
name must be distinguishable and contain "Inc.," or Co.," or the designation "Co"chartered," "professional association,"	orp," "Inc," or "Co".	A professional corporation	ed" or the abbreviation "Corp.,"
B. Enter new principal office address, if applicable:		N/A	
(Principal office address <u>MUST BE A S</u>	IREET ADDRESS)		
C. Enter new mailing address, if appli		N/A	
(Mailing address MAY BE A POST (<u>OFFICE BOX</u>)		
 If amending the registered agent an new registered agent and/or the new 			name of the
	N/A		
Name of New Registered Agent			
	(Florida s	treet address)	
New Registered Office Address:	N/A		, Florida
		(City)	(Zip Code)
New Registered Agent's Signature, if cl I hereby accept the appointment as registe			ions of the position.
	erea agem i am jamma.	www.accepy.or	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,
	Signature of New	Registered Agent, if changin	og -
Check if applicable			
☐ The amendment(s) is/are being filed po	ursuant 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)

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 = Chairmon 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 Do	<u>oe</u>	
X Remove	<u>V</u>	Mike Jo	<u>ones</u>	
X Add	<u>sv</u>	Sally Si	<u>mith</u>	
Type of Action (Check One)	<u>Title</u>		<u>Name</u>	<u>Addres</u> s
1) Change	v		ISABEL MARIA REMON COLLAD	9800 CARIBBEAN BLVD,
X Add				CUTLER BAY, FL 33189
Remove				
2) Change		_		
Add				
Remove 3) Change		_		
Add				
Remove				
4) Change		_		
Add				
Remove				
5) Change				
Add				
Remove				
6) Change		_		
Add				
Remove				

E. If amending or adding additional Articles, enter change(s) here:	
(Attach additional sheets, if necessary). (Be specific)	
N/A	
F. If 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)	
w/A	

	05/13/2021	
The date of each amendment(s) and the date of each amendment(s) and the date this document was signed.	loption:	, if other than the
•	3/2021	
<u>, p</u>	(no more than 90 days after amendment fi	le date)
Note: If the date inserted in this bedocument's effective date on the De	lock does not meet the applicable statutory filing requipartment of State's records.	irements, this date will not be listed as the
Adoption of Amendment(s)	(<u>CHECK ONE</u>)	
■ The amendment(s) was/were add action was not required.	pted by the incorporators, or board of directors without	shareholder action and shareholder
☐ The amendment(s) was/were add by the shareholders was/were su	pted by the shareholders. The number of votes cast for fficient for approval.	the amendment(s)
	roved by the shareholders through voting groups. The feach voting group entitled to vote separately on the amo	
"The number of votes cast	for the amendment(s) was/were sufficient for approval	
by		
	(voting group)	
05/13/2021 Dated		
Signature	(Breneigh	
(By a di selected	rector, president or other officer – if directors or officer I, by an incorporator – if in the hands of a receiver, trust ed fiduciary by that fiduciary)	
	TAMARA COLLADO	
	(Typed or printed name of person signing)	
	PRESIDENT	
	(Title of person signing)	