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COVER LETTER

TO: Amendment Section Division of Corporations

NAME OF CORPO	RATION: SHALEMING				
DOCUMENT NUMI	P16000056327				
The enclosed Articles	of Amendment and fee are su	bmitted for filing.			
Please return all corre	spondence concerning this ma	tter to the following:			
	PABLO C MELGAREJO				
		Name of Contact Persor	1		
	SHALEMING				
		Firm/ Company			
	6790 NW 186TH ST STE 20)1			
	Address				
	HIALEAH FL 33015				
		City/ State and Zip Code	2		
santi	nico6@hotmail.com				
	-	sed for future annual report	notification)		
For further informatio	n concerning this matter, pleas	se call:			
PABLO CESAR MELGAREJO		305 at (785-9349 de & Daytime Telephone Number		
Name of Contact Person		Area Co	de & Daytime Telephone Number		
Enclosed is a check to	or the following amount made	payable to the Florida Depa	irtment of State:		
S35 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		Street Address			
Amendment Section		Amendment Section Division of Corporations			
Division of Corporations P.O. Box 6327		Clitton Building			
Tallahassee, FL 32314		2661 Executive Center Circle			

Tallahassee, FL 32301

Articles of Amendment to Articles of Incorporation

of

SHALEMING		
(<u>Name</u> c	of Corporation as curre	ntly filed with the Florida Dept. of State)
P16000056327		
	(Document Number	r of Corporation (if known)
Pursuant to the provisions of section 607, its Articles of Incorporation:	1006, Florida Statutes, th	is Florida Profit Corporation adopts the following amendment(s) to
A. If amending name, enter the new na	ime of the corporation:	
N/A		The new
	nation "Corp," "Inc." or	tion," "company," or "incorporated" or the abbreviation "Co". A professional corporation name must contain the
B. Enter new principal office address,	if annlicable:	N/A
(Principal office address MUST BE A S		
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 adnew registered agent and/or the new registered office address		
Name of New Registered Agent	N/A	
<u>Name of New Registerea Agent</u>	N/A	
	(Florida	street address)
	N/A	OL . 1
New Registered Office Address:	_	Civy (Zip Code)
New Registered Agent's Signature, if c I hereby accept the appointment as regis	hanging Registered Age tered agent. I am familia	
	Signature of Nev	v 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>	<u>John Do</u>	<u>e</u>	
X Remove	<u>V</u>	Mike Jo	nes	
<u>X</u> Add	<u>sv</u>	Sally Sn	<u>nith</u>	
Type of Action (Check One)	<u>Title</u>		Name	<u>Addres</u> s
1) Change	VP		SANTIAGO A MELGAREJO	6790 NW 186TH ST APT 201
XX Add		_	<u>.</u>	HIALEAH FL 33015
Remove				
2) Change		_		
Add				
Remove				
3) Change				
Add				<u> </u>
Remove				
4) Change				
Add				
Remove				
51 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)	
N/A	

The date of each amendment		, if other than
date this document was signed	l. - 07/19/2018	
Effective date if applicable:		
	(no more than 90 days after amendment file date)	
	this block does not meet the applicable statutory filing requirements, this date he Department of State's records.	will not be listed as
Adoption of Amendment(s)	(<u>CHECK ONE</u>)	
☐ The amendment(s) was/we by the shareholders was/w	re adopted by the shareholders. The number of votes cast for the amendment(s) ere sufficient for approval.	
	re approved by the shareholders through voting groups. The following statement ed for each voting group entitled to vote separately on the amendment(s):	,
"The number of votes	s east for the amendment(s) was/were sufficient for approval	
hy		
	(voting group)	
The amendment(s) was/we action was not required.	re adopted by the board of directors without shareholder action and shareholder	
☐ The amendment(s) was/we action was not required.	re adopted by the incorporators without shareholder action and shareholder	
07/19 Dated	0/2018	
	14	
Se	By a director, president or other officer – if directors or officers have not been elected, by an incorporator – if in the hands of a receiver, trustee, or other court populated fiduciary by that fiduciary)	
	PABLO C MELGAREJO	
	(Typed or printed name of person signing)	
	PRESIDENT DIRECTOR	
	(Title of person signing)	

the

the