## P16000571797

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## COVER LETTER

TO: Amendment Section Division of Corporations

NAME OF CORPOR	RATION: LUIS PALMA IN	C	
DOCUMENT NUMI	BER: P16000071797	<del>-</del> ·	
The enclosed Articles	of Amendment and fee are so	abmitted for filing.	
Please return all corre-	spondence concerning this ma	atter to the following:	
	LUIS PALMA		
		Name of Contact Perso	n
		Firm/ Company	
	9037 W 33 AVE		
	INSTRACTOR SEALS	Address	
	HIALEAH FL 33018	City/ State and Zip Cod	
		City/ State and Zip Cod	u e
For further information	E-mail address: (to be un concerning this matter, plea	sed for future annual report se call:	notification)
LUIS PALMA		786	278-1280
Name (	of Contact Person		de & Daytime Telephone Number
Enclosed is a check fo	r the following amount made	payable to the Florida Depa	ortment 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 Divi P.O.	ling Address Indiment Section Ission of Corporations Box 6327 Inhassee, FL 32314	Amend Divisio Clifton	Address Iment Section on of Corporations Building Executive Center Circle

Tallahassee, FL 32301

## Articles of Amendment to Articles of Incorporation of

LUIS PALMA INC	
(Name of Corporation as currently	filed with the Florida Dept. of State)
P16000071797	
(Document Number of	Corporation (if known)
Pursuant to the provisions of section $607.1006$ . Florida Statutes, this $F$ its Articles of Incorporation:	Florida Profit Corporation adopts the following amendment(s) to
A. If amending name, enter the new name of the corporation:	
	The new
name must be distinguishable and contain the word "corporation," "Corp.," "Inc.," or Co.," or the designation "Corp.," "Inc," or "Cword "chartered," "professional association," or the abbreviation "F	" "company," or "incorporated" or the abbreviation O". A professional corporation name must contain the
B. Enter new principal office address, if applicable:	
(Principal office address <u>MUST BE A STREET ADDRESS</u> )	
C. Enter new mailing address, if applicable:	down lock a secret 2 con
(Mailing address <u>MAY BE A POST OFFICE BOX</u> )	422 S Dixie Highway
	Hollywood FL 33020
D. If amending the registered agent and/or registered office addressive registered agent and/or the new registered office address:	ss in Florida, enter the name of the
Name of New Registered Agent	
(Florida stree	et address)
New Registered Office Address:	, Florida
- · · · · · · · · · · · · · · · · · · ·	City) (Zip Code)
New Registered Agent's Signature, if changing Registered Agent: I hereby accept the appointment as registered agent. I am familiar wi	th and accept the obligations of the position.
· · · · · · · · · · · · · · · · · · ·	
Simulture of Vina B	
Signature of Sew Reg	Co Ci
	20 0
	Grand Maria

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>	<u>Name</u>	Address
1) Change	<u>v</u>	DAVID ZUNIGA	1308 SW 2ND AVE
X Add			DANIA BEACH FL 33004
Remove			
2) Change	<u>v</u>	CARLOS ZUNIGA	1308 SW 2ND AVE
X Add			DANIA BEACH FL 33004
Remove			
3 ) Change			
Add			
Remove			
4) Change			
Add			
Remove			
5) Change			
Add			
Remove			
б) Change			
Add			
Remove			

Attach additional sheets, if necessary).	(Be specific)
-	
<del></del>	
an amendment provides for an exchi	ange, reclassification, or cancellation of issued shares,
provisions for implementing the amen	ndment if not contained in the amendment itself:
(if not applicable, indicate N/A)	

	10/09/2017	
The date of each amendment(s) a	loption:	, if other than the
date this document was signed,	,	
10/0 Effective date <u>if applicable</u> :	9/2017	
	(no more than 90 days after amendment fi	le date)
Note: If the date inserted in this document's effective date on the De	lock does not meet the applicable statutory filing requipartment of State's records.	rements, this date will not be listed as the
Adoption of Amendment(s)	( <u>CHECK ONE)</u>	
☐ The amendment(s) was/were ad- by the shareholders was/were so	pted by the shareholders. The number of votes east for flicient for approval.	the amendment(s)
	roved by the shareholders through voting groups. The fa- each 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)	
	(voting group)	
action was not required.  The amendment(s) was/were add	pted by the board of directors without shareholder action pted by the incorporators without shareholder action and	
action was not required.		
10/09/2017 Dated	<del>\</del> \{\}	
	A A A	
Signature X		<del></del>
selecte	rector, president or other officer – if directors or officers d, by an incorporator – if in the hands of a receiver, truste ed fiduciary by that fiduciary)	
	LUIS PALMA	
	(Typed or printed name of person signing)	<u> </u>
	PRESIDENT	
	(Title of person signing)	