P16000078284

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(Requestor's Name)	-
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(Business Entity Name)	-
(Document Number)	-
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OCT 27 2021	

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COVER LETTER

TO: Amendment Section Division of Corporations

NAME OF CORPORATION: _____

DOCUMENT NUMBER: P16000078284

The enclosed Articles of Amendment and fee are submitted for filing.

Please return all correspondence concerning this matter to the following:

FRANCISCO A MARRERO

Name of Contact Person

344 W 65 ST SUITE 204

Address

Firm/ Company

HIALEAH, FL 33012

City/ State and Zip Code

MABROBUSINESSCONSULTING@GMAIL.COM

E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

 FRANCISCO A MARRERO
 at (305)
 320-9330

 Name of Contact Person
 Area Code & Daytime Telephone Number

Enclosed is a check for the following amount made payable to the Florida Department of State:

🔳 \$35 Filing Fee

S43.75 Filing Fee & Certificate of Status ☐\$43.75 Filing Fee & Certified Copy (Additional copy is enclosed) S52.50 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	

<u>Street Address</u> Amendment Section Division of Corporations The Centre of Tallahassee 2415 N. Monroe Street, Suite 810 Tallahassee, FL 32303

Articles of Amendment to Articles of Incorporation of

(Name of Corporation as currently filed with the Florida Dept. of State OCT 18 PH 4: 19 P16000078284 SECRETARY 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: The new 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". A 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) ____, Florida_ <u>New Registered Office Address:</u> (Zip Code) (Cin)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

Check if applicable

The amendment(s) is/are being filed pursuant to s. 607.0120 (11) (e), F.S.

MABRO BUSINESS CONSULTING & TAX CORP

FILED

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)

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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:

<u>X</u> Change	<u>PT</u>	John Doe	
<u>X</u> Remove	<u>V</u>	Mike Jones	
<u>X</u> Add	<u>sv</u>	Sally Smith	
<u>Type of Action</u> (Check One)	<u>Title</u>	Name	<u>Addres</u> s
1) Change	Р	LAZARO J MARRERO	344 W 65 ST SUITE 204
Add			HIALEAH, FL 33012
X Remove			
2) $\frac{X}{2}$ Change	Р	FRANCISCO A MARRERO	344 W 65 ST SUITE 204
Add			HIALEAH, FL 33012
Remove			
Add			
Remove			
4) Change			
Add			
Remove			
5) Change			
Add			
Remove			
6) Change			
Add			
Remove			

Attach additional sheets, if neces	tary). (Be specifi	(*)		
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<u>f an amendment provides for a provisions for implementing th</u>	<u>n exchange, reclas</u> a amandmant if n	sification, or cancel	lation of issued sha	<u>res.</u>
(if not applicable, indicate N	<u>e amendment i m</u> 74)	n contained in the a	inchance user.	
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The	date of each amendment(s) adoption: _
date	this document was signed.

Effective date if applicable:

by

(no more than 90 days after amendment file date)

Note: If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as the document's effective date on the Department of State's records.

Adoption of Amendment(s) (CHECK ONE)

· . .

- The amendment(s) was/were adopted by the incorporators, or board of directors without shareholder action and shareholder action was not required.
- The amendment(s) was/were adopted by the shareholders. The number of votes cast 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

	(voting group)
sele	a director, president of other other – if directors or officers have not been eted, by an incorporator – if in the hands of a receiver, trustee, or other court ointed fiduciary by that fiduciary FRANCISCO A MARRERO
	(Typed or printed name of person signing)