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TO: Amendment Section Division of Corporations

NAME OF CORPORATION: _	SEGURU REVENUE CONSULTANTS INC	
DOCUMENT NUMBER:	P16000085560	
The enclosed Articles of Amendm	ent and fee are submitted for filing.	
Please return all correspondence co	oncerning this matter to the following:	
	DAVID G. CABREJO	
	Name of Contact Person	
SI	EGURU REVENUE CONSULTANTS INC	
	Firm/ Company	
	3710 NW 116TH TERRACE	٠ -
	Address	7
	SUNRISE, FLORIDA 33323	, ,
	City/ State and Zip Code	
E-mail add	ASTTAXSERVICES@GMAIL.COM ress: (to be used for future annual report notification)	·
For further information concerning	this matter. please call:	_
DAVID G. CABRE		
Name of Contact Person	Area Code & Daytime Telephone Number	
Enclosed is a check for the followi	ng amount made payable to the Florida Department of State:	
☑ \$35 Filing Fee ☐ \$43.75 Filin Certificate (enclosed)
Mailing Address Amendment Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314	Street Address Amendment Section Division of Corporations Clifton Building 2661 Executive Center Circle	

Tallahassee, FL 32301

Articles of Amendment to Articles of Incorporation

SEGURU REVENUE CONSULTANTS INC

(Name of Corporation as currently filed with the Florida Dept. of State) P16000085560

(Document Num	ber of Corporation (if know	wn)	
Pursuant to the provisions of section 607.1006 amendment(s) to its Articles of Incorporation:	5, Florida Statutes, this <i>Fl</i>	orida Profit Corporation adopts the	: followin
A. If amending name, enter the new name of	the corporation:		
		The	
name must be distinguishable and contain tabbreviation "Corp.," "Inc.," or Co.," or the name must contain the word "chartered," "pro	designation "Corp," "Inc	" or "Co". A professional corpora	the ution
B. Enter new principal office address, if app	licable:		
(Principal office address MUST BE A STREE			
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE)			
D. If amending the registered agent and/or r new registered agent and/or the new regis		n Florida, enter the name of the	-
Name of New Registered Agent:	· · · · · · · · · · · · · · · · · · ·	· .	J.
	<u> </u>		
New Registered Office Address:	(Florida street o	address)	
		, Florida	
	(City)	(Zip Code)	
New Registered Agent's Signature, if changing	na Registered Agent:		
Thereby accept the appointment as registered a	igent. I am familiar with a	md accept the obligations of the posit	tion.
	Sionature of New Registered	d Avent, 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)

<u>Title</u>	<u>Name</u>	Address	Type of Action
<u>VP</u>	JOSHUA A. CABREJO	11728 NW 38TH PLACE SUNRISE, FLORIDA 33323	
	ding or adding additional Articles, em- ditional sheets, if necessary). (Be spe		
<u>provisio</u>	nendment provides for an exchange, ions for implementing the amendment of applicable, indicate N/A)		
		_	
· · ·			

The date of each amendmen	t(s) adoption: 12/18	3/2023
Effective date <u>if applicable</u> :	12/18/2023	date of adoption is required)
	(no more than 90 da	ays after amendment file date)
Adoption of Amendment(s)	(<u>CHEC</u>	(K ONE)
✓ The amendment(s) was/w by the shareholders was/v		archolders. The number of votes cast for the amendment(s) roval.
		hareholders through voting groups. The following statement oup entitled to vote separately on the amendment(s):
"The number of vote:	cast for the amendme	ent(s) was/were sufficient for approval
by		<u></u>
	(voting group)	
action was not required.		ard of directors without shareholder action and shareholder
The amendment(s) was/w action was not required.	ere adopted by the inc	corporators without shareholder action and shareholder
Dated_12/	18/2023	
Signature _	O ale	ef fi
se		or other officer - if directors or officers have not been ator - if in the hands of a receiver, trustee, or other court hat fiduciary)
		DAVID G. CABREJO
	(Typed	or printed name of person signing)
		PRESIDENT
	(Title of pe	erson signing)