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/Pa	questor's Name)	
(Ne	questors Maine)	-
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DA)	dress)	
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(Cit	y/State/Zip/Phone	e #)
PICK-UP	WAIT	MAIL
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Certified Copies	Certificates	s of Status
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Special Instructions to	Filing Officer:	
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COVER LETTER

TO: Amendment Section
Division of Corporations

	RATION: A INGELMO INC		
DOCUMENT NUM	BER: P16000098080		
The enclosed Articles	of Amendment and fee are su	abmitted for filing.	
Please return all corre	spondence concerning this ma	tter to the following:	
	ALEJANDRO J INGELMO		
		Name of Contact Person	n
		Firm/ Company	
	1551 NW 29TH STREET		
		Address	
	MIAMI FL 33133		
		City/ State and Zip Cod	e
berna	ardosaruski@hotmail.com		
<u> </u>	E-mail address: (to be us	sed for future annual report	notification)
or further informatio	n concerning this matter, pleas	se call:	
BERNARDO SARU	SKI	at (305) 448-4446 de & Daytime Telephone Number
Name	of Contact Person	Area Co	de & Daytime Telephone Number
inclosed is a check for	or the following amount made	payable to the Florida Depa	artment 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)
	iling Address	Street Address	
	endment Section ision of Corporations	Amendment Section Division of Corporations	
	. Box 6327	Clifton Building	
Tall	ahassee, FL 32314	2661 Executive Center Circle	

Tallahassee, FL 32301

Articles of Amendment to Articles of Incorporation of

A INGELMO INC			
(Name	of Corporation as current	ly filed with the Florida Dept. of State)	
P16000098080			
	(Document Number o	f Corporation (if known)	
Pursuant to the provisions of section 607, its Articles of Incorporation:	1006, Florida Statutes, this	Florida Profit Corporation adopts the following amendment(s) to	
A. If amending name, enter the new na	ame of the corporation;		
ALEJANDRO INGELMO CORP		The new	
	nation "Corp," "Inc," or	n," "company," or "incorporated" or the abbreviation "Co". A professional corporation name must contain the	
		3663 SW 8TH STREET SUITE 210	
B. Enter new principal office address, if applicable: (Principal office address MUST BE A STREET ADDRESS)		MIAMI FL 33135	
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)		3663 SW 8TH STREET SUITE 210	
		MIAMI FL 33135	
D. If amending the registered agent an new registered agent and/or the new			
Name of New Registered Agent	3663 SW 8TH STREET S	SHITE 210	
		reet address)	
V B	MIAMI	33135	
New Registered Office Address:		(City), Florida (Zip Code)	
New Registered Agent's Signature, if c I hereby accept the appointment as regist	ered agent. I am familiar	Registered Agent, if changing	
	Signature of New I	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.

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)	Title	<u>Name</u>	<u>Addres</u> s
1) X Change	P	ALEJANDRO J INGELMO	3663 SW 8TH STREET SUITE 210
Add			MIAMI FL 33135
Remove			
2) X Change	<u>s</u>	ALEJANDRO J INGELMO	3663 SW 8TH STREET SUITE 21 0
Add			MIAMI FL 33135
Remove			
3) Change			
Add			
Remove			
4) Change			
Add			
Remove			
5) Change	 		
Add			
Remove			· · · · · · · · · · · · · · · · · · ·
6) Change		_	
Add			
Demove			

E. If amending or adding additional Artic (Attach additional sheets, if necessary).	cles, enter change(s) here: (Be specific)
N/A	V
F. If an amendment provides for an exchi- provisions for implementing the amer	ange, reclassification, or cancellation of issued shares, ndment if not contained in the amendment itself:
(if not applicable, indicate N/A)	
N/A	
······································	
	

The date of each amendment(s) date this document was signed.	adoption:	, if other than the
•		
Effective date <u>if applicable</u> :	(no more than 90 days after amendment file date)	
Note: If the date inserted in this document's effective date on the I	block does not meet the applicable statutory filing requirements, this date Department of State's records.	will not be listed as the
Adoption of Amendment(s)	(CHECK ONE)	
The amendment(s) was/were aby the shareholders was/were	dopted by the shareholders. The number of votes cast for the amendment(s) sufficient for approval.	
	pproved by the shareholders through voting groups. The following statement or each voting group entitled to vote separately on the amendment(s):	
"The number of votes ca	st for the amendment(s) was/were sufficient for approval	
by	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	
•	(voting group)	
☐ The amendment(s) was/were a action was not required.	dopted by the board of directors without shareholder action and shareholder	
☐ The amendment(s) was/were a action was not required.	dopted by the incorporators without shareholder action and shareholder	
12/15/20	16	
DatedSignature	alexander t. Lychin	
selec	director, president or other officer – if directors or officers have not been ted, by an incorporator – if in the hands of a receiver, trustee, or other court inted fiduciary by that fiduciary)	
	ALEJANDRO J INGELMO	
	(Typed or printed name of person signing)	
	PRESIDENT	
	(Title of person signing)	