P1700007004

(Requestor's Name)
(Address)
(Address)
(City/State/Zip/Phone #)
PICK-UP WAIT MAIL
(Business Entity Name)
(Document Number)
Certified Copies Certificates of Status
Special Instructions to Filing Officer:
_

Office Use Only

Le63-



200320497592

11/08/18--01008--015 ++35.00

2018 DEC 10 AM II: 57

C. GOLDEN
DEC 1 1 2018

COVER LETTER

TO: Amendment Section Division of Corporations

NAME OF CORPORATION: FINTAX LEGAL	INTERNATIONAL SL CO	PRPORATION
DOCUMENT NUMBER: P17000007064		
The enclosed Articles of Amendment and fee are	submitted for filing.	
Please return all correspondence concerning this n	natter to the following:	
DAVID K. KUSCHEL		
	Name of Contact Person	1
ĐAVID K. KUSCHEL P.A	۸.	
	Firm/ Company	
27 N. PENNOCK LANE,	SUITE 204	
	Address	
JUPITER, FL 33458		
	City/ State and Zip Code	
ANYNAME715@AOL.COM		
E-mail address: (to be	used for future annual report	notification)
For further information concerning this matter, ple	ase call:	
DAVID K. KUSCHEL	561	339-4885
Name of Contact Person	at (Area Code & Daytime Telephone Number	
Enclosed is a check for the following amount made		
■ \$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)
Mailing Address Amendment Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314	Amend Divisio Clifton	Address ment Section n of Corporations Building xccutive Center Circle

Tallahassee, FL 32301



November 14, 2018

DAVID K. KUSCHEL 27 N. PENNOCK LANE SUITE 204 JUPITER, FL 3458

SUBJECT: FINTAX LEGAL INTERNATIONAL SL CORPORATION

Ref. Number: P17000007064

We have received your document and check(s) totaling \$35.00. However, the enclosed document has not been filed and is being returned to you for the following reason(s):

The application/form submitted does not meet the requirements of this office; please complete the attached application/form.

The current name of the entity is as referenced above. Please correct your document accordingly.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6050.

Letter Number: 018A00023430

Claretha Golden Regulatory Specialist II

2018 DEC 10 AM 11:31

Articles of Amendment to Articles of Incorporation of

FILED

FINTAX LEGAL INTERNATIONAL	SL	CORPORATI	ON
----------------------------	----	-----------	----

2018 DEC 10 AM 11: 57

(Name of Corporation as current)	y filed with the Florida Dept. of State)
P17000007064	SU HERARY OF STATE TALLAHASSEE, FL
(Document Number o.	f Corporation (if known)
Pursuant to the provisions of section 607.1006, Florida Statutes, this its Articles of Incorporation:	Florida Profit Corporation adopts the following amendment(s) to
A. If amending name, enter the new name of the corporation:	
N/A	The new
name must be distinguishable and contain the word "corporation "Corp.," "Inc.," or Co.," or the designation "Corp," "Inc," or " word "chartered," "professional association," or the abbreviation "	n," "company," or "incorporated" or the abbreviation Co". A professional corporation name must contain the
	N/A
B. Enter new principal office address, if applicable:	
(Principal office address <u>MUST BE A STREET ADDRESS</u>)	
a n	
C. Enter new mailing address, if applicable:	N/A
(Mailing address <u>MAY BE A POST OFFICE BOX</u>)	
D. If amending the registered agent and/or registered office addr	some in 121 milder and a state of the
new registered agent and/or the new registered office address	ess in Florida, enter the name of the
N/A	<u>.</u>
Name of New Registered Agent	<u></u>
(Florida str	and and desired
•	ver adaress)
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 w	ith and accept the obligations of the position.
	. ,
4/4	
Signature of New R	egistered 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	PT	John Doe	
X Remove	Y	Mike Jones	
X Add	<u>\$V</u>	Sally Smith	
Type of Action (Check One)	Title	Name	Address
1) Change	Р	RICKY SPEARMAN	7629 POPLAR STREET
X Add			LITHONIA, GA 30058-1550
Remove			
2) X Change	VP	JEAN-AIME MEDICI	27 N. PENNOCK LANE, # 204
Add			JUPITER, FL 33458
Remove			
3) X Change	T	DAVID K. KUSCHEL	27 N. PENNOCK LANE, # 204
Add			JUPITER, FL 33458
Remove			
4) Change			
Add			
Remove			
5) Change			
Add			
Remove			
6) Change			
Add			
Remove			

د، <u>۱۱:</u> At)	f amending or adding additional Articles, ent Attach additional sheets, if necessary). (Be spe	er cnange(s) he ecific)	<u>re</u> :		
N/A		1, /			
		<u> </u>			
		· · · · ·	·		
					·
	_				
'-	1		-		-
_					
					
				<u> </u>	
	-	<u>-</u>			
			,		
		 -		-	
					
			. "		
F. <u>lf </u>	f an amendment provides for an exchange, re	classification, o	r cancellation o	of issued shares,	
Βi	provisions for implementing the amendment i	f not contained	in the amenda	nent itself:	
N1/A	(if not applicable, indicate N/A)				
N/A					
					•
	-				
		· <u>-</u>	<u> </u>		
		<u>-</u>			
		-			

•	NOVEMBER 1, 2018	
The date of each amendment(s)	adoption:	, if other than the
date this document was signed.		
	OVEMBER 1, 2018	
Effective date if applicable:	(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 department of State's records.	date will not be listed as the
Adoption of Amendment(s)	(<u>CHECK ONE</u>)	
☐ The amendment(s) was/were ac by the shareholders was/were s	dopted by the shareholders. The number of votes cast for the amendme sufficient for approval.	nt(s)
☐ The amendment(s) was/were ap must be separately provided for	oproved by the shareholders through voting groups. The following state or each voting group entitled to vote separately on the amendment(s):	?ment
	t for the amendment(s) was/were sufficient for approval	
by	(voting group)	
•	(voting group)	
	lopted by the board of directors without shareholder action and shareho	older
☐ The amendment(s) was/were ac action was not required.	lopted by the incorporators without shareholder action and shareholder	
Datedt2	6/2018	
Signature	Laid X. Mil	
select	director, president or other officer – if directors or officers have not beed, by an incorporator – if in the hands of a receiver, trustee, or other conted fiduciary by that fiduciary)	en ourt
	DAVID K. KUSCHEL	
	(Typed or printed name of person signing)	
	TREASURER	
	(Title of person signing)	