P170000 10594

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COVER LETTER

TO: Amendment Section Division of Corporations

NAME OF CORPORAT	TON: CHECK PLASTE	R INC	
DOCUMENT NUMBER	P17000010894		
The enclosed Articles of A	Amendment and fee are su	abmitted for tiling.	
Please return all correspor	idence concerning this ma	atter to the following:	
EZ	EQUIEL PEREZ		
		Name of Contact Person	1
		Firm/ Company	
225	NE 13TH STREET SUI	TE 221	
HO	MESTEAD, FLORIDA 3	Address	
		City/ State and Zip Code	<u>e</u>
AL	L.FLORIDACCOUNTIN	G7@YAHOO.COM	
	E-mail address: (to be u.	sed for future annual report	notification)
For further information co	-		
JAIRO CASTRO		786 at (de & Daytime Telephone Number
Name of Contact Person		Area Co	de & Daytime Telephone Number
Enclosed is a check for the	: following amount made	payable to the Florida Depa	artment of State:
S35 Filing Fee	□\$43.75 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		Street Address 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 curre	ently tiled with the F	lorida Dept. of State)
P17000010894		
(Document Number	er of Corporation (if k	known)
Pursuant to the provisions of section 607.1006, Florida Statutes, t ts Articles of Incorporation:	his <i>Florida Profit Co</i>	rporation adopts the following amendment(s
A. If amending name, enter the new name of the corporation	<u> </u>	
		The new
name must he distinguishable and contain the word "corporation, "Inc.," or Co.," or the designation "Corp," "Inc," or "Co", "chartered," "professional association," or the abbreviation "P.	. A professional co	corporated" or the abbreviation "Corp.," apporation name must contain the word
3. Enter new principal office address, if applicable:		<i>Q</i> a
Principal office address <u>MUST BE A STREET ADDRESS</u>)		2026 . Žič
		S T
		
C. Enter new mailing address, if applicable:		92 Z
(Mailing address MAY BE A POST OFFICE BOX)		
· · · · · · · · · · · · · · · · · · ·		
		<u> </u>
		02
 If amending the registered agent and/or registered office a new registered agent and/or the new registered office addr 		nter the name of the
new registered agent and or the new registered write addr	<u> </u>	
Name of New Registered Agent		-
(Florida	street address)	
New Registered Office Address:		. Florida
	(City)	(Zip Code)
New Registered Agent's Signature, if changing Registered Agentic	ent:	
hereby accept the appointment as registered agent. I am familia	ar with and accept the	e obligations of the position.

Signature of New Registered Agent, if changing

Check if applicable

 $[\]Box$ The amendment(s) is/are being filed pursuant to s. 607.0120 (11) (e), F.S.

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>	<u>Addres</u> s
1) Change	V	ELIZABETH CONTRERAS	225 NE 13TH STREET suite 211
X Add			HOMESTEAD, FL 33030
Remove			
2) Change			_
Add			
Remove 3) Change			
Add			
Remove			
4) Change		_	
Add			<u></u>
Remove			
5) Change			
Add			
Remove			
6) Change			
Add			
Remove			· · ·

(Attach additional sheets, if nece,	ssary). (Be spec	ific)			
	- -				

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f an amendment provides for a	an exchange, recl	assification, or ca	ncellation of issued	t shares.	
provisions for implementing the	<u>he amendment if</u>	not contained in t	he amendment its	elf:	
(if not applicable, indicate	N/A)		· · · · · · · · · · · · · · · · · · ·		
				··	
					
			· · · · · · · · · · · · · · · · · · ·		
				· · · · · · · · · · · · · · · · · · ·	

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	s) adoption:	if other than
date this document was signed.		
Effective date if applicable:		
	(no more than 90 days after amendment file d	ate)
	is block does not meet the applicable statutory filing requirent Department of State's records.	nents, this date will not be listed as
Adoption of Amendment(s)	(CHECK ONE)	
The amendment(s) was/were action was not required.	adopted by the incorporators, or board of directors without sha	reholder action and shareholder
☐ The amendment(s) was/were by the shareholders was/wei	adopted by the shareholders. The number of votes cast for the e sufficient for approval.	amendment(s)
	approved by the shareholders through voting groups. The follofor each voting group entitled to vote separately on the amenda	
"The number of votes	east for the amendment(s) was/were sufficient for approval	
by	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	
,	(voting group)	
09-11/2 Dated	020	
	a director, president or other officer – if directors or officers ha	
	ected, by an incorporator – if in the hands of a receiver, trustee, sointed fiduciary by that fiduciary)	or other court
	EZEQUIEL PEREZ	
	(Typed or printed name of person signing)	
	PRESIDENT	
	(Title of person signing)	

the

the