## P17000018135

(Re	equestor's Name)	
(Ad	ldress)	<u></u>
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Amend

APR 0 4 2017

I ALBRITTON

## **COVER LETTER**

**TO:** Amendment Section Division of Corporations

NAME OF CORPORATION	ON: FRANKY'S EFEC	CTIVO CORP	-	
DOCUMENT NUMBER:	P17000018135			·
The enclosed Articles of Am		bmitted for fili	ng.	
Please return all corresponde	ence concerning this ma	tter to the follo	wing:	
CAR	LOS A. SANTOS II, E	SQ.		
		Name of Co	ontact Person	1
5	ame			
_ <del></del> _		Firm/ (	Company	
815 (	N.W. 57TH AVE, STE	. 335		
		Ad	dress	
MIAN	/II, FLORIDA 33126			
		City/ State	and Zip Code	2
	Santos La E-mail address: (to be us	weho	tma	il.com
<u></u>	E-mail address: (to be us	sed for future a	nnual report	notification)
For further information conc	erning this matter, pleas	se call:		
CARLOS A. SANTOS II,	ESQ.	at (	305	de & Daytime Telephone Number
Name of Contact Person			Area Co	de & Daytime Telephone Number
Enclosed is a check for the f	ollowing amount made	payable to the	Florida Depa	ertment of State:
■ \$35 Filing Fee □	3\$43.75 Filing Fee & Certificate of Status	S43.75 Fi Certified (Additional enclosed)	Copy I copy is	□\$52.50 Filing Fee Certificate of Status Certified Copy (Additional Copy is enclosed)
Mailing A				Address
Amendment Section		Amendment Section Division of Corporations		
Division of Corporations P.O. Box 6327		Clifton Building		
	e. FL 32314			xecutive Center Circle

Tallahassee, FL 32301

## Articles of Amendment to Articles of Incorporation of

FRANKY'S EFECTIVO CORP.					
(Name of Corporati	on as currently filed with the Florida Dept.	of State	)		
P17000018135					
(Docum	nent Number of Corporation (if known)				
Pursuant to the provisions of section 607.1006, Floridatis Articles of Incorporation:	a Statutes, this Florida Profit Corporation add	opts the f	ollowing	amend	ment(s) to
A. If amending name, enter the new name of the co	orporation:				
				The n	ew
name must be distinguishable and contain the wor. "Corp.," "Inc.," or Co.," or the designation "Corp, word "chartered," "professional association," or the	" "Inc," or "Co". A professional corporat				
B. Enter new principal office address, if applicable (Principal office address MUST BE A STREET ADD					-
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BO	<u>X</u> )		SECRETA TALLAHAS	2017 HAR 3	- - -
D. If amending the registered agent and/or register new registered agent and/or the new registered		e of the	RY DE STATE	PM 12: 21	- m
Name of New Registered Agent			<b>&gt;</b>	. 🕶	
	(Florida street address)	·.			
New Registered Office Address:		Florida			
	(City)		(Zip Co	ode)	_
New Registered Agent's Signature, if changing Reg I hereby accept the appointment as registered agent.	istered Agent: I am familiar with and accept the obligations	of the po	sition.		
Sign	ature of New 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.

Example: X Change	PT Joh	un Doc	
X Remove	<u>V</u> <u>Mil</u>	ke Jones	
X Add	<u>SV</u> <u>Sal</u>	ly Smith	
Type of Action (Check One)	<u>Title</u>	Name	<u>Addres</u> s
1) Change	VST	SOFIA MELEAN	12344 SW 127 AVE
X Add			MIAMI, FL 33186
Remove			
2) Change			
Add			
Remove			
3) Change		<del></del>	
Add			
Remove			
4) Change		etter sir in	
Add			
Remove			
5) Change			
Add		<del>.</del>	
Remove		,	
Kemove			
6) Change			
Add			
Remove			

If amending or adding additional Arti Attach additional sheets, if necessary).	(Be specific)
,	
· · · · · · · · · · · · · · · · · · ·	
f an amendment provides for an exch provisions for implementing the ame (if not applicable, indicate N/A)	hange, reclassification, or cancellation of issued shares, endment if not contained in the amendment itself:

	3-25-17	: C = 41 41 41.
The date of each amendment date this document was signed		, if other than the
date this document was signed	3-25-17	
Effective date if applicable:	3-23-17	
	(no more than 90 days after amendment file date)	
	this block does not meet the applicable statutory filing requirements, this date ne Department of State's records.	will not be listed as the
Adoption of Amendment(s)	( <u>CHECK ONE</u> )	
■ The amendment(s) was/wer by the shareholders was/we	re adopted by the shareholders. The number of votes cast for the amendment(s) ere sufficient for approval.	
	re approved by the shareholders through voting groups. The following statement of for each voting group entitled to vote separately on the amendment(s):	t
	cast for the amendment(s) was/were sufficient for approval	
by	(voting group)	
	(voting group)	
action was not required.	re adopted by the board of directors without shareholder action and shareholder re adopted by the incorporators without shareholder action and shareholder	
action was not required.		
3-25- Dated	17	
Signature	- function factor	·
se	by a director, president or other officer – if directors or officers have not been elected, by an incorporator – if in the hands of a receiver, trustee, or other court oppointed fiduciary by that fiduciary)	
	FRANKLIN JOSE PONTON IMITOLA	
	(Typed or printed name of person signing)	
	PRESIDENT AND SECRETARY	
	(Title of person signing)	