P17000 018 875

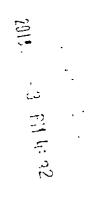
(R	equestor's Name)		
(Address)			
(A	ddress)		
(C	ity/State/Zip/Phone	#)	
PICK-UP	☐ WAIT	MAIL	
(B	usiness Entity Name	e)	
(D	ocument Number)		
Certified Copies	Certificates o	of Status	
Special Instructions to	Filing Officer:		

Office Use Only



800333639638

09/03/19--01025--023 *#35.00



Amend

SEP 1 1 ZO19

! ALBRITTON!

COVER LETTER

TO: Amendment Section Division of Corporations

NAME OF CORPOR	ATION: TTEL CORP		
DOCUMENT NUMB	ER: P 17000018875		
	of Amendment and fee are su	bmitted for filing.	
Please return all corres	pondence concerning this ma	tter to the following:	
	CARLOS D ACOSTA		
		Name of Contact Person	1
	ITEL CORP		
		Firm/ Company	
	68 SE 6TH STREET, SUITE	• •	
		Address	
	MIAMI, FLORIDA 33131		
		City/ State and Zip Cod	e
CACO	OSTA@ITELCORP.COM		
	E-mail address: (to be us	sed for future annual report	notification)
For further information	concerning this matter, pleas	se call:	
CARLOS D ACOSTA		at (6322892
Name of Contact Person		Area Co	de & Daytime Telephone Number
Enclosed is a check for	r 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)
Mailing Address Amendment Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314		Ameno Divisio Clifton	Address Iment Section on of Corporations Building Executive Center Circle

Tallahassee, FL 32301

Articles of Amendment to Articles of Incorporation

to s of Incorporation of

ITEL CORP	,	J 6.
(Name of Corporation as curren	tly filed with the Florida Dept. of State)	J F114.32
P17000018875		
(Document Number	of Corporation (if known)	<u> </u>
Pursuant to the provisions of section 607.1006, Florida Statutes, thi its Articles of Incorporation:	is Florida Profit Corporation adopts the following	ing amendment(
A. If amending name, enter the new name of the corporation:		
		The new
name must be distinguishable and contain the word "corporat "Corp.," "Inc.," or Co.," or the designation "Corp," "Inc," or word "chartered," "professional association," or the abbreviation	"Co". A professional corporation name mus	abbreviation t contain the
B. Enter new principal office address, if applicable:	68 SE 6TH STREET	
(Principal office address MUST BE A STREET ADDRESS)	SUITE 1708	
	MIAMI, FLORIDA 33131	
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)	68 SE 6TH STREET	
<u> </u>	SUITE 1708	
	MIAMI, FLORIDA 33131	
D. If amending the registered agent and/or registered office ad new registered agent and/or the new registered office addre		
Name of New Registered Agent		_
(Florida :	street address)	_
New Registered Office Address:	, Florida	
The state of the production.		Code)
New Registered Agent's Signature, if changing Registered Agen		
I hereby accept the appointment as registered agent. I am familia	r with and accept the obligations of the position	
Signature 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, 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 = C Executive Officer; CFO = Chief Financial Officer. If an officer/director holds more than one title, list the first letter of each of 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. Thera change, Mike Jones leaves the corporation, Sally Smith is named the V and S. These should be noted as John Doe, PT as a Charmike Jones, V as Remove, and Sally Smith, SV as an Add.

Example:		John Doc	
X Change	PT		
X Remove	<u>V</u>	Mike Jones	
X Add	<u>\$V</u>	Sally Smith	
Type of Action (Check One)	<u>Title</u>	<u>Name</u>	<u>Addres</u> s
1) Change	P	DALILA CHAVEZ	3830 LYONS RD
Add			APT. 205
X Remove			COCONUT CREEK, FL 33073
2) X Change	p	CARLOS D ACOSTA	68 SE 6TH STREET
Add			SUITE 1708
Remove			MIAMI, FLORIDA 33131
3) Change			
Add			
Remove			
4) Change			
Add			
Remove			
5) Change			
Add			
Remove			
6) Change			
Add			
Remove			

<u>If amending or adding additional Articles, enter change(s) here:</u> (Attach additional sheets, if necessary). (Be specific)				
(, , , , , , , , , , , , , , , , , , ,			
				
			· · · · · · · · · · · · · · · · · · ·	
				
	<u> </u>	<u></u>		<u> </u>
-				
			<u> </u>	
		_ _		··
If an amendment provides for an	exchange, reclassification,	or cancellation of issue	ed shares,	
provisions for implementing the	amendment if not contain	ed in the amendment it	<u>self:</u>	
(if not applicable, indicate No	A)			
- .				
 				
			<u>,</u>	
	<u> </u>			
· · · · · ·				
	<u> </u>			

8/22/2019	if ashan th
The date of each amendment(s) adoption:date this document was signed.	, if other th
Effective date if applicable:	
(no more ti	han 90 days after amendment file date)
Note: If the date inserted in this block does not meet the adocument's effective date on the Department of State's record	applicable statutory filing requirements, this date will not be listed ds.
Adoption of Amendment(s) (CHECK ONE)	
The amendment(s) was/were adopted by the shareholders by the shareholders was/were sufficient for approval.	The number of votes cast for the amendment(s)
☐ The amendment(s) was/were approved by the shareholder must be separately provided for each voting group entitle	
"The number of votes east for the amendment(s) was	s/were sufficient for approval
by	
(voting group)	
☐ The amendment(s) was/were adopted by the board of dire action was not required.	ctors without shareholder action and shareholder
☐ The amendment(s) was/were adopted by the incorporators action was not required.	s without shareholder action and shareholder
8/22/2109 Dated	forta of
(By a director, president or othe	r officer = if directors or officers have not been in the hands of a receiver, trustee, or other court
appointed fiduciary by that fiduciary	
CARLOS D ACOSTA	
(Typed or pri	nted name of person signing)
PRESIDENT	
	Title of person signing)