P1700032198

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2019 HAY 13 PH 3: 33

C. GOLDEN MAY 2 8 2019

	<u>¢</u>	OVER LETTER	
TO: Amendment Section Division of Corporations			
NAME OF CORPORATION:	AIR FIX EXPERTS INC		
	000032198		
The enclosed Articles of Amenda	ment and fee are submitted	I for filing.	
Please return all correspondence	concerning this matter to t	he following:	
MAGAL	Y MENDOZA		
	Nan	ne of Contact Person	1
GMA FIN	JANCIAL LLC		
		Firm/ Company	
7700 N K	ENDAL DRIVE . SUITE	300	
		Address	
MIAMI, I	L 33156		
	City	State and Zip Code	
CONTACT@G	MAFLLC.COM		
E-ma	il address: (to be used for t	uture annual report	notification)
For further information concerning	ng this matter, please call:		
MAGALY MENDOZA		305	305-3780
Name of Contact	Person	Area Coo	de & Daytime Telephone Number
Enclosed is a check for the follow	 ving amount made payable 	to the Florida Depa	rtment of State:
	rtificate of Status Ce (Ac	 3.75 Filing Fee & rtified Copy ditional copy is closed	☐\$52.50 Filing Fee Certificate of Status Certified Copy (Additional Copy is enclosed)
Mailing Address Amendment Section Division of Corporations		Amenda Division	Address ment Section n of Corporations
P.O. Box 6327 Tallahassee, Fl			Building kecutive Center Circle
·		Tallaha	ssee, FL 32301

Articles of Amendment to Articles of Incorporation οf

FHED

2019 MAY 13 PM 3: 33 AIR FIX EXPERTS INC (Name of Corporation as currently filed with the Florida Dept. of State) P17000032198 (Document Number of Corporation (if known) Pursuant to the provisions of section 607.1006, Florida Statutes, this Florida Profit Corporation adopts the following amendment(s) to its Articles of Incorporation: A. If amending name, enter the new name of the corporation: N/A The new name must be distinguishable and contain the word "corporation," "company," or "incorporated" or the abbreviation "Corp.," "Inc.," or Co.," or the designation "Corp." "Inc," or "Co". A professional corporation name must contain the word "chartered," "professional association," or the abbreviation "P.A." 7700 N KENDAL DRIVE, SUITE 300 B. Enter new principal office address, if applicable: (Principal office address <u>MUST BE A STREET ADDRESS</u>) MIAMI, FL 33156 C. Enter new mailing address, if applicable: 7700 N KENDAL DRIVE, SUITE 300 (Mailing address MAY BE A POST OFFICE BOX) MIAMI, FL 33156 D. If amending the registered agent and/or registered office address in Florida, enter the name of the new registered agent and/or the new registered office address: GMA FINANCIAL LLC Name of New Registered Agent 7700 N KENDA'L DRIVE . SUITE 300 (Florida street address) _. Florida____33156 MIAMI New Registered Office Address: (City) New Registered Agent's Signature, if changing Registered Agent: I hereby accept the appointment as registered agent. I am\familiar with and accept the obligations of the position. Signature of New Registered Agent, if changing

If amending the Officers and/o	r Directors, enter the tit	e 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 nece	ssary)	
Please note the officer/director to		
P = President; V = Vice Preside	nt; T= Treasurer; S= Sec	cretary; 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.

Mike Jones, V as Remove Example:	, and Så	lly Smith, SV as an Add.		
X Change	<u>PT</u>	<u>John Doe</u>		
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	MARTINEZ,	JULIANA	3115 NE 208 TERRACE
Add				AVENTURA, FL 33180
X Remove				
2) Change	D	MARTINEZ,	EFRAIN	3115 NE 208 TERRACE
Add				AVENTURA, FL 33180
X Remove				
3) Change				
Add				
Remove				
4) Change				
Add				
Remove				
5) Change				
Add				
Remove				
6) Change				
Add				<u></u>
Remove				

If amending or adding addit Attach additional sheets, if n	rcessary). (Be specific)	
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If an amendment provides f	or an exchange, reclassif	ication, or cancellation of issued shares,
provisions for implementin	the amendment if not	contained in the amendment itself:
(if not applicable, indica	ate N/A) 	
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		Page 3 of 4

TI A 6	01/01/2019	, if other than
The date of each amendment(s) date this document was signed.	} adoption:!	, it outer than
0	 1/01/2019 	
Effective date <u>if applicable</u> : _	(no more	than 90 days after amendment file date)
Note: If the date inserted in the document's effective date on the		applicable statutory filing requirements, this date will not be listed as brds.
Adoption of Amendment(s)	(CHECK ON	! <u>E</u>)
☐ The amendment(s) was/were by the shareholders was/were		rs. The number of votes cast for the amendment(s)
		 lers through voting groups. The following statement itled to vote separately on the amendment(s):
"The number of votes c	 ast for the amendment(s) v 	 was/were sufficient for approval
by		
	(voting group)	
☐ The amendment(s) was/were action was not required.	adopted by the board of di	rectors without shareholder action and shareholder
The amendment(s) was/were action was not required.	adopted by the incorporate	ors without shareholder action and shareholder
05/09/2 Dated	o19	
Signature	Celum	a- Luguji
(By		her officer - if directors or officers have not been
	cted, by an incorporator – ointed fiduciary by that fid	if in the hands of a receiver, trustee, or other court
l/b	ALVARO LEGUIZA	
	(Typed or p	printed name of person signing)
	PRESIDENT	
		(Title of person signing)
		Page 4 of 4

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