P17000036354

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JAN 27 2021

COVER LETTER

TO: Amendment Section

Division of Corporations

P.O. Box 6327

Tallahassee, FL 32314

NAME OF CORPORATION: ALY'S PARTY RENTALS, INC DOCUMENT NUMBER: P17000036354 The enclosed Articles of Amendment and fee are submitted for filing. Please return all correspondence concerning this matter to the following: ANA CEDILLO Name of Contact Person RIGHTEOUSNESS OAKS SERVICES LLC Firm/ Company 9105 INTEGRA MEADOWS DR APT 312 Address DAVENPORT, FLORIDA 33896 City/ State and Zip Code anac@rosimmigration.com E-mail address: (to be used for future annual report notification) For further information concerning this matter, please call: at (202) 3208676

Area Code & Daytime Telephone Number ANA CEDILLO Name of Contact Person Enclosed is a check for the following amount made payable to the Florida Department of State: ☐ \$35 Filing Fee □\$43.75 Filing Fee & □\$43.75 Filing Fee & ■\$52.50 Filing Fee Certificate of Status Certified Copy Certificate of Status (Additional copy is Certified Copy enclosed) (Additional Copy is enclosed) Mailing Address Street Address Amendment Section Amendment Section Division of Corporations Division of Corporations

The Centre of Tallahassee 2415 N. Monroe Street, Suite 810

Tallahassee, FL 32303

Articles of Amendment to Articles of Incorporation of

ALY'S PARTY RENTALS, INC

7131 3711111111111111111111111111111111				
(Name o	f Corporation as current	ly filed with the Florida Dept. of Sta	ītē)	
P17000036354				
	(Document Number o	of Corporation (if known)		
Pursuant to the provisions of section 607, its Articles of Incorporation:	1006, Florida Statutes, this	Florida Profit Corporation adopts th	e following	, ainendment(s) to
A. If amending name, enter the new na	me of the corporation:			
MAZEL TOV EVENTS BY SONIA HA	QUET, CO			The new
name must be distinguishable and contain "Inc.," or Co.," or the designation "C "chartered," "professional association,"	orp," "Inc," or "Co".	A professional corporation name m	ibbreviation ust contain	n "Corp.," the word
R. Enter new principal office address	if applicable:	14614 Bayonne RD,		
B. Enter new principal office address, if applicable: (Principal office address MUST BE A STREET ADDRESS)		Orlando, Fl. 32832		
C. Enter new mailing address, if applicable:		14614 Bayonne RD.		
(Mailing address MAY BE A POST)	OFFICE BOX)			53
		Orlando, FL 32832	<u>·</u>	_ <u></u>
			1,7-5	·
D. If amending the registered agent an new registered agent and/or the new	d/or registered office address	Iress in Florida, enter the name of the	ne Kai	P [7]
new registered agent and/or the nex	SONIA A. HAQUET	3-	1100 m=1-1	N D
Name of New Registered Agent				£-
	14614 Bayonne Rd	<u> </u>	· 	
		treet address)	221122	
New Registered Office Address:	Orlando,	, Florid		
		(City)	(Zip C	'ode)
New Registered Agent's Signature, if c I hereby accept the appointment as regist	hanging Registered Agen ered agent - Lam familiar	Nith and accept the obligations of the	nosition.	
Thereby decept the appointment as region	Crearing Critical Production	+	1	
	(F. 1)			
	44	ALJEST	 	_
	Signature of Yew	Registered Agent, if changing		
Check if applicable		1		

☐ 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: XChange	<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	P	LINDA CORTEZ	2809 Lake Vista Dr
Add			Kissimmee, Fl 34744
X Remove			
2) X Change	PTS	SONIA A. HAQUET	14614 Bayonne Rd
Add			Orlando, Florida 32832
Remove 3) Change	V	FERMIN SUAREZ	
X Add			14614 Bayonne Rd
Remove			Orlando, Florida 32832
4) Change	Ö	AMAYRANI SUAREZ	
X Add			14614 Bayonne Rd
Remove			Orlando, Florida 32832
5) Change			
Add			
Remove			
6) Change			_
Add			
Remove			

ASE SEE ATTACHMENT.	
	
an amendment provides for an exchange, reclassification, or cancellation of issued shares, provisions for implementing the amendment if not contained in the amendment itself:	
(if not applicable, indicate N/A)	
· · · · · · · · · · · · · · · · · · ·	
	
	····,

	11/18/2020	
The date of each amendment date this document was signed		, if other than the
	11/18/2020	
Effective date <u>if applicable</u> :	(no more than 90 days after amendment fi	le date)
	his block does not meet the applicable statutory filing require Department of State's records.	irements, this date will not be listed as the
Adoption of Amendment(s)	(<u>CHECK ONE</u>)	
■ The amendment(s) was/wer action was not required.	e adopted by the incorporators, or board of directors without	shareholder action and shareholder
☐ The amendment(s) was/wei by the shareholders was/w	e adopted by the shareholders. The number of votes east for ere sufficient for approval.	the amendment(s)
	e approved by the shareholders through voting groups. The j d for each voting group entitled to vote separately on the am	
"The number of votes	east for the amendment(s) was/were sufficient for approval	
by N/A		
	(voting group)	
11/18 Dated	2020	
Signature	Celul	
(B	y a director, president or other officer – if drectors or officer lected, by an incorporator – if in the hunds of a receiver, trust pointed fiduciary by that fiduciary)	
	Sonia A. Haquet	
	(Typed or printed name of person signing)	
	PRESIDENT	
	(Title of person signing)	