P17000038409

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COVER LETTER

TO: Amendment Section Division of Corporations

NAME OF CORPO	ORATION: SANDRA ROJAS	P.A.	
DOCUMENT NUM	P17000038400		
The enclosed Article	s of Amendment and fee are su	ubmitted for filing.	
Please return all corr	espondence concerning this ma	atter to the following:	
	SANDRA ROJAS		
		Name of Contact Person	n
	SANDRA ROJAS P.A.		
		Firm/ Company	
8300 NW 53 STREET. SUITE 350			
Address			
	DORAL FL 33166		
		City/ State and Zip Cod	e
eroi	aspa@gmail.com		
- 		sed for future annual report	notification)
	E-man address, (to be a	sed for future annual report	notification)
For further informati	on concerning this matter, pleas	se call:	
SANDRA ROJAS		786at (253 9222
Name of Contact Person		Area Co	de & Daytime Telephone Number
Enclosed is a check if	or 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)	☐\$52.50 Filing Fee Certificate of Status Certified Copy (Additional Copy is enclosed)
An Di P.C	niling Address nendment Section vision of Corporations D. Box 6327 Ilahassec, FL 32314	Amend Divisio Clifton	Address Iment Section on of Corporations Building Executive Center Circle

Tallahassee, FL 32301

Articles of Amendment to Articles of Incorporation of

SANDRA ROJAS P A. (Name of Corporation as currently filed with the Florida Dept. of State) P17000038409 (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: 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." B. Enter new principal office address, if applicable: (Principal office address MUST BE A STREET ADDRESS) C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX) 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: Name of New Registered Agent (Florida street address) 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/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)	Title	<u>Name</u>	<u>Addres</u> s
1) Change	VP	ANDRES F SANCHEZ	8300 NW 53 STREET SUITE 350
X Add			DORAL FL 33166
Remove			
2) Change			
Add			
Remove			
3) Change			
Add			
Remove			
4) Change			
Add			
Remove			
5) Change			-
Add			<u> </u>
Remove			
6) Change		_	-
Add			
Remove			

(Attach addition	adding additional Anal sheets, if necessary). (Be specific	M/A			
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provisions for	ent provides for an eximplementing the audicable, indicate N/A)	<u>nendment if not</u>	ification, or cancell contained in the a	ation of issued sha mendment itself:	ares,	
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	NOVEMBER I 2017	
The date of each amendment(s)	adoption:, if o	ther than the
date this document was signed.		
N Effective date <u>if applicable:</u>	OVEMBER 1 2017	
in applicable.	(no more than 90 days after amendment file date)	
Note: If the date inserted in thi document's effective date on the	s block does not meet the applicable statutory filing requirements, this date will not be Department of State's records.	listed as th
Adoption of Amendment(s)	(<u>CHECK ONE</u>)	
☐ The amendment(s) was/were a by the shareholders was/were	adopted by the shareholders. The number of votes east for the amendment(s) sufficient for approval.	
	approved by the shareholders through voting groups. The following statement for each voting group entitled to vote separately on the amendment(s):	
	ast for the amendment(s) was/were sufficient for approval	
by	(varing mann)	
- J	(voting group)	
action was not required.	adopted by the board of directors without shareholder action and shareholder adopted by the incorporators without shareholder action and shareholder	
NOVEM Dated Signature	1BER 15 2017	
(By a	a director, president or other officer - if directors or officers have not been cited, by an incorporator - if in the hands of a receiver, trustee, or other court pointed fiduciary by that fiduciary)	
	SANDRA ROJAS	
	(Typed or printed name of person signing)	_
	PRESIDENT	
	(Title of person signing)	