## PM000044164

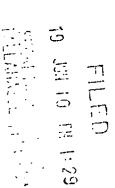
| (Re                     | equestor's Name)    |           |
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| PICK-UP                 | ☐ WAIT              | MAIL      |
| (Bu                     | usiness Entity Namo | e)        |
| (Dc                     | ocument Number)     |           |
| Certified Copies        | _ Certificates      | of Status |
| Special Instructions to | Filing Officer:     |           |
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JUN 22 2019 S. YOUNG



## **COVER LETTER**

TO: Amendment Section Division of Corporations

| NAME OF CORPORATION:  | ANA SENI                | OR LAW.  | P. A.            |   |
|---|-------------------------|--|------------------|---|
| DOCUMENT NUMBER:P_(   | 7000044164              |  |                  |   |
| The enclosed Articles of Amendme  | nt and fee are submit   | ted for filing.  |                  |   |
| Please return all correspondence con  | ncerning this matter to | o the following:   |                  |   |
|   | And                     | SÉ NioiZ   |                  |   |
|   | N                       | SEN joiZ<br>ame of Contact   | Person           | <u> </u>  |
|   | ANA SEN                 | 100 1411   | D A              |   |
|   | 7/1/1/                  | Firm/ Compa  | nv               |   |
|   |                         | •  | •                | 774   |
|   | 4901 VINEL,             | Address  | 76(12            | <u> </u>  |
|   | 4901 VINEL,<br>ORLANDO. | CORAL  | 27011            |   |
|   | UCLANIS.                | <i>FLOWIDA</i><br>ity/ State and Zi                                | 72 341<br>n Coda |   |
|   | C                       | ny state and zi  | p code           |   |
| ANI   | GANASENOR               | LAW-COM  |                  |   |
| E-mail a  | iddress: (to be used fo | or future annual   | report notif     | ication)  |
|   |                         |  |                  |   |
| For further information concerning  | this matter, please cal | II:  |                  |   |
| 1 1   |                         |  |                  |   |
| ANA SENIOR  |                         | at ( <u>40</u>   | <u>_ ( 7</u>     | 421 -0775   |
| Name of Contact Pe  | rson                    | Aı   | rea Code &       | Daytime Telephone Number  |
| Enclosed is a check for the following amount made payable to the Florida Department of State: |                         |  |                  |   |
| Inclused is a circuit for the following   | E amount made payar     | ore to the Frontin   |                  |   |
| •   | icate of Status (       | S43.75 Filing Fo<br>Certified Copy<br>Additional copy<br>enclosed) | is is            | \$52.50 Filing Fee<br>Certificate of Status<br>Certified Copy<br>(Additional Copy<br>is enclosed) |
| Mailing Address Street Address  |                         |  |                  |   |
| Amendment Secti   |                         | Amendment Section  |                  |   |
| Division of Corporations P.O. Box 6327  Division of Corporations Clifton Building             |                         |  |                  |   |
| Tallahassee, FL 3   | 2314                    |  |                  | itive Center Circle   |

Tallahassee, FL 32301

## **Articles of Amendment**

Articles of Incorporation of

|  | OR LAU,  |                                      |                                  |                     |           |
|--|--|--------------------------------------|----------------------------------|---------------------|-----------|
| (Name of Corporation)  |  | with the Florid:                     | a Dept. of State                 | <u>e</u> )          |           |
| P (70000   | 744164   |                                      | _                                |                     |           |
| (Docum   | ent Number of Corp   | oration (if known                    | )                                |                     |           |
| Pursuant to the provisions of section 607.1006, Florida its Articles of Incorporation:   | Statutes, this Florid  | a Profit Corpora                     | tion adopts the                  | following amendm    | ent(s) to |
| A. If amending name, enter the new name of the co  | rporation:   |                                      |                                  |                     |           |
| CHANDOKE SENIOIZ, P.   | A.   |                                      |                                  | The nev             |           |
| name must be distinguishable and contain the word<br>"Corp.," "Inc.," or Co.," or the designation "Corp,<br>word "chartered," "professional association," or the d | d "corporation," "c<br>" "Inc," or "Co".   | ompany," or "ii<br>A professional co | ncorporated" o<br>orporation nan | or the abbreviation | 11        |
| B. Enter new principal office address, if applicable   | <u></u>  |                                      | _                                | <u>-: 6</u>         |           |
| Principal office address <u>MUST BE A STREET ADD</u>   | RESS )   |                                      |                                  | E -                 | 7.        |
|  | <del></del>  |                                      |                                  | 10 PH 1:20          |           |
|  |  |                                      |                                  | ·                   | <br>[1]   |
| C. Enter new mailing address, if applicable:   |  |                                      |                                  | 三点。 里               | لمد       |
| (Mailing address <u>MAY BE A POST OFFICE BO)</u>   | <u>\(\frac{\fin}}}}}}{\frac}\frac{\frac{\frac}}}}}}}}}{\frac{\frac{\frac{\frac{\frac{\frac{\frac{\frac}}}}}}}}}}}}}}}}}}}}}}}}}}}}}}}}}}}}</u> | <u> </u>                             |                                  |                     |           |
|  |  |                                      |                                  | 27.75               |           |
|  |  |                                      |                                  |                     |           |
|  |  |                                      |                                  | <del></del> .       |           |
| ). If amending the registered agent and/or register  |  | <u>Florida, enter th</u>             | e name of the                    |                     |           |
| new registered agent and/or the new registered of  | omice address:   |                                      |                                  |                     |           |
| Name of New Registered Agent   |  | <u> </u>                             | _                                |                     |           |
|  |  |                                      |                                  |                     |           |
|  | (Florida street add  | ress)                                |                                  |                     |           |
| New Registered Office Address:   |  |                                      | . Florida                        |                     |           |
|  | (City)   |                                      |                                  | (Zip Code)          |           |
|  |  |                                      |                                  |                     |           |
|  |  |                                      |                                  |                     |           |
| New Registered Agent's Signature, if changing Region hereby accept the appointment as registered agent. If   | <mark>stered Agent:</mark><br>Lam familiar with an   | d account the ablic                  | entions of the n                 | unition.            |           |
| neren, accept the appointment as registered agent. T   | am jamaan wan an   | и ассери те оплиз                    | занонз ој те ре                  | smon.               |           |
|  |  |                                      |                                  |                     |           |

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 Doc         |                    |
|-------------------------------|-----------------|------------------|--------------------|
| X Remove                      | $\underline{V}$ | Mike Jones       |                    |
| _X Add                        | <u>sv</u>       | Sally Smith      |                    |
| Type of Action<br>(Check One) | Title           | <u>Name</u>      | Address            |
| 1) Change                     | P               | ANA MADIA SENICE | 4901 VINELAM RD.   |
| Add                           |                 |                  | # 27c              |
| Remove                        |                 |                  | 021/ANDO, FL 328/1 |
| 2) Change                     | V               | REE CHANDORE     | 4901 VINELAND ED.  |
| Add                           |                 |                  | #77°               |
| Remove                        |                 |                  | OZLANDO, FL 32811  |
| 3 ) Change                    |                 |                  |                    |
| Add                           |                 |                  |                    |
| Remove                        |                 |                  |                    |
| 4) Change                     |                 |                  |                    |
| Add                           |                 |                  |                    |
| Remove                        |                 |                  |                    |
| 5) Change                     |                 |                  |                    |
| Add                           |                 |                  |                    |
| Remove                        |                 |                  |                    |
| 6) Change                     |                 |                  |                    |
| Add                           |                 |                  |                    |
| Remove                        |                 |                  |                    |

| Attach additional sheets, if necessary). | (Be specific)   |
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| provisions for implementing the appear   | nange, reclassification, or cancellation of issued shares, and and in the amendment itself: |
| (if not applicable, indicate N/A)        | nument if not contained in the amendment usen:  |
| (y nor apprecion, material (1171)        |   |
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| The date of each amendment(s) adoption:  | , if other than the          |
|--|------------------------------|
| date this document was signed.   |                              |
| Effective date <u>if applicable</u> :  |                              |
| (no more than 90 days after amendment file date)   |                              |
| Note: If the date inserted in this block does not meet the applicable statutory filing requirements, this da document's effective date on the Department of State's records.   | te will not be listed as the |
| Adoption of Amendment(s) ( <u>CHECK ONE</u> )  |                              |
| ☐ The amendment(s) was/were adopted by the shareholders. The number of votes cast for the amendment(s by the shareholders was/were sufficient for approval.  | ;)                           |
| ☐ The amendment(s) was/were approved by the shareholders through voting groups. The following stateme must be separately provided for each voting group entitled to vote separately on the amendment(s):                   | 'ni                          |
| "The number of votes cast for the amendment(s) was/were sufficient for approval  |                              |
| by   |                              |
| (voting group)   |                              |
| ☐ The amendment(s) was/were adopted by the board of directors without shareholder action and shareholde action was not required.   | r                            |
| The amendment(s) was/were adopted by the incorporators without shareholder action and shareholder action was not required.   |                              |
| Dated $0/0/2019$   |                              |
|  |                              |
| Signature  (By a director, president or other officer – if directors or officers have not been selected, by an incorporator – if in the hands of a receiver, trustee, or other cour appointed fiduciary by that fiduciary) | t                            |
| Arca Maria Senior  |                              |
| (Typed or printed name of person signing)  | <del></del>                  |
| 图 President  |                              |
| (Title of person signing)  |                              |