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: CUEVAS, GARCIA & TORRES, P.A.

Account Number : I20030000123

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**Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please. **

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COR AMND/RESTATE/CORRECT OR O/D RESIGN GLASORES CONSULTING INC

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C. GOLDEN

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p. l



April 12, 2019

FLORIDA DEPARTMENT OF STATE
Division of Corporations

GLASORES CONSULTING INC 24801 SW 130TH AVE 114 HOMESTEAD, FL 33032

SUBJECT: GLASORES CONSULTING INC

REF: P17000051068

We received your electronically transmitted document. However, the document has not been filed. Please make the following corrections and refax the complete document, including the electronic filing cover sheet.

You failed to make the correction(s) requested in our previous letter.

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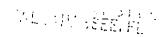
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Claretha Golden Regulatory Specialist II FAX Aud. #: H19000115413 Letter Number: 719A00007399

H19000 1154113 BD

2019 APR 19 AM 9: 46

Articles of Amendment to Articles of Incorporation



GLASORES CONSULTING INC		
(Name o	of Corporation as currently filed with the l	Florida Dept. of State)
P17000051068		
	(Document Number of Corporation (if)	known)
Pursuant to the provisions of section 607, its Articles of Incorporation:	1006, Florida Statutes, this Florida Profit Co	prporation adopts the following amendment(s)
A. If amending name, enter the new na	ame of the corporation:	
SAIRUS CONSULITING INC		77
name must be distinguishable and con "Corp.," "Inc.," or Co.," or the design word "chartered," "professional associa	tain the word "corporation," "company," tation "Corp," "Inc," or "Co". A professition," or the abbreviation "P.A."	or "incorporated" or the abbreviation onal corporation name must contain the
B. Enter new principal office address, (Principal office address MUST BE A S		
C. Enter new mailing address, if appli (Mailing address MAY BE A POST) D. If amending the registered agent an		nter the name of the
new registered agent and/or the new	w registered office address:	ater the name of the
Name of New Registered Agent	CUEVAS, GARCIA & TORRES, P.A.	
	7300 N Kendall Dr., Suite 680	
	(Florida street address)	
New Registered Office Address:	Miami	. Florida 33156
	(City)	(Zip Code)
New Registered Agent's Signature, if cl I hereby accept the appointment as regist	hanging Registered Agent: ered agent. I am familiar with and accept the second	

H19000115413 3

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	<u> </u>	
X Remove	<u>v</u>	Mike Inc	es	
_X Add	<u>\$v</u> .	Sally Sm	<u>itb</u>	
Type of Action (Check One)	<u>Tide</u>		<u>Name</u>	Address
1) Change	P		DELGADO, IOSE	
Add X Remove				
2) Change	<u>Р</u>	_	DELGADO, FERNANDO	13760 SW 272 ST, APT 103
X Add				NARANJA, FL 33032
Remove				
3) Change		- .		
Add				
Remove				
4) Change				-
Add				
Remove				
5) Change				
Add				
Ramove				
6)Change				
Add				
Remove				

H19000115413 3

N/A	th additional sheets, if necessary).	les, enter change(s) (Be svecific)			
	7,	(,,,			
					
					
					
				<u> </u>	
			·	************	
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. If an	amendment provides for an exchivisions for implementing the amen	nge, reclassificatio	n, or cancellation of	issued shares,	
prov	amendment provides for an exchivisions for implementing the amen (if not applicable, indicate N/A)	nge, reclassificatio dment if not contai	n, or cancellation of ned in the amendme	issued shures, nt itself:	
pro	visions for implementing the amen	inge, reclussificatio dment if not contai	n, or cancellation of ned in the amendme	issued shures, at itself:	
pro	visions for implementing the amen	nge, reclassificatio dment if not contai	n, or cancellation of ned in the amendme	issued shures, at itself:	
pro	visions for implementing the amen	nge, reclassificatio dment if not contai	n, or cancellation of ned in the amendme	issued shures, at itself:	
pro	visions for implementing the amen	inge, reclussificatio dment if not contai	n, or cancellation of ned in the amendme	issued shures, at itself:	
pro	visions for implementing the amen	nge, reclassificatio dment if not contai	n, or cancellation of ned in the amendme	issued shures, at itself:	
pro	visions for implementing the amen	nge, reclassificatio dment if not contai	n, or cancellation of ned in the amendme	issued shures, at itself:	
prov	visions for implementing the amen	inge, reclussification dment if not contain	n, or cancellation of ned in the amendme	issued shures, at itself:	
pro	visions for implementing the amen	inge, reclussificatio dment if not contai	n, or cancellation of ned in the amendme	issued shures, nt itself:	
pro	visions for implementing the amen	nge, reclassificatio	n, or cancellation of ned in the amendme	issued shures, nt itself:	
pro	visions for implementing the amen	inge, reclussification dment if not contain	n, or cancellation of ned in the amendme	issued shures, at itself:	

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The date of each amendment(s) adoption:	, if other than the
Effective date if applicable:	
(no more than 90 days aft	er amendment file date)
Note: If the date inserted in this block does not meet the applicable statu document's effective date on the Department of State's records.	story filing requirements, this date will not be listed as the
Adoption of Amendment(s) (CHECK ONE)	
The amendment(s) was/were adopted by the shareholders. The number of by the shareholders was/were sufficient for approval.	of votes east for the amendment(s)
The amendment(s) was/were approved by the shareholders through votin must be separately provided for each voting group entitled to vote separately provided.	g groups. The following statement cately on the amendment(s):
"The number of votes cast for the amendment(s) was/were sufficien	it for approva)
by(voting group)	
(voting group)	
The amendment(s) was/were adopted by the board of directors without si action was not required.	narcholder action and shareholder
The amendment(s) was/were adopted by the incorporators without sharel action was not required.	nolder action and shareholder
Dated04 05 19	
Signature	
(By a director, president or other officer - if dir selected, by an incorporator - if in the hands of appointed fiduciary by that fiduciary)	ectors or officers have not been a receiver, trustee, or other court
Fernando Deigado	
(Typed or printed name of prin	erson signing)
(Title of person s	signing)