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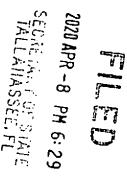
(Re	questor's Name)	
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PICK-UP	☐ WAIT	MA i L
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COVER LETTER

TO: Amendment Section Division of Corporations

NAME OF CORPOR	ATION: SOPIA E	scoro Obor	vac, P.A.	
DOCUMENT NUMB	ER: P1700005	6162		
	of Amendment and fee are su			
Please return all corres	pondence concerning this ma	tter to the following:		
	SOUIA O	Name of Contact Person		
•		Name of Contact Person		
	THE O'DONNE	L LAW FIRM	•	
	•	Firm/ Company		
	501 Bruker	Ker Dawe, Sa Address	ITE BOS	
	Miani F	City/ State and Zip Code	1	
,		City/ State and Zip Code		
	SED @ SONIAD	mossissed		
•	E-mail address: (to be us	sed for future annual report	notification)	
For further information	n concerning this matter, pleas	se call:		
S-114 (Dowsu	at (305	9878862	
Name o	of Contact Person	Area Co	de & Daytime Telephone Number	
Enclosed is a check for	r the following amount made	payable to the Florida Depa	artment of State:	
☐ \$35 Filing Fee	S43.75 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)	
<u>Mai</u>	ling Address	Street	Address	
Amendment Section		Amendment Section		
	sion of Corporations Box 6327		n of Corporations entre of Tallahassee	
	ahassee, FL 32314		N. Monroe Street, Suite 810	

Tallahassee, FL 32303

Articles of Amendment to Articles of Incorporation

P. 70000 561 62	on as currently filed with the Florida Dept. of State)
	nent Number of Corporation (if known)
Pursuant to the provisions of section 607.1006, Florida its Articles of Incorporation:	a Statutes, this Florida Profit Corporation adopts the following amendment(s) to
A. If amending name, enter the new name of the co	orporation:
THE ODONAL LAW A	am, P.A. The new
 B. Enter new principal office address, if applicable (Principal office address <u>MUST BE A STREET ADD</u>) C. Enter new mailing address, if applicable: (Mailing address <u>MAY BE A POST OFFICE BO</u>) 	MIAMI, FLANDA 33132
(Principal office address MUST BE A STREET ADD C. Enter new mailing address, if applicable:	MAMI, FLANDA 33131 red office address in Florida, enter the name of the office address:
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BO D. If amending the registered agent and/or register new registered agent and/or the new registered	501 Bruker Key Druk # 505 Midmi, Frank 33131 red office address in Florida, enter the name of the office address:

Signature of New Registered Agent, if changing

Check if applicable

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.

X Change	<u>PT</u>	John Doe	
X Remove	V	Mike Jones	
X Add	<u>sv</u>	Sally Smith	
Type of Action (Check One)	<u>Title</u>	<u>Name</u>	Address
1) Change			
Add			·····
Remove			
2) Change		_	
Add			
Remove 3) Change			
Add			
Remove			
4) Change			
Add			
Remove			
5) Change			
Add			
Remove			
6) Change			
Add			
Remove			

If amending or adding additional Ar Attach additional sheets, if necessary).). (Be specific)
	
	<u> </u>
·	
	
f an amendment provides for an exc	change, reclassification, or cancellation of issued shares,
provisions for implementing the am (if not applicable, indicate N/A)	nendment if not contained in the amendment itself:
(y mor approxime, marcan :mr)	

. . .

	ndment(s) adoption:
date this document wa	3/10/200
Effective date if appl	(no more than 90 days after amendment file date)
	rted in this block does not meet the applicable statutory filing requirements, this date will not be listed as the late on the Department of State's records.
Adoption of Amenda	nent(s) (<u>CHECK ONE</u>)
The amendment(s) action was not requ	was/were adopted by the incorporators, or board of directors without shareholder action and shareholder ired.
	was/were adopted by the shareholders. The number of votes cast for the amendment(s) s was/were sufficient for approval.
	was/were approved by the shareholders through voting groups. The following statement provided for each voting group entitled to vote separately on the amendment(s):
"The number	of votes cast for the amendment(s) was/were sufficient for approval
by	,,
	(voting group)
Date	nature . Since = 171 11 11 11 11
Sigr	nature - A ICA (=1/1 16 11 11 11 11 11 11 11 11 11 11 11 11
	(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 court appointed fiduciary by that fiduciary)
	SONA ESCOCIO GIDONARL
	(Typed or printed name of person signing)
	PROSIDENT, DIRECTOR
	(Title of person signing)