## Florida Department of State

Division of Corporations Electronic Filing Cover Sheet

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To:

Division of Corporations

Fax Number : (850)617-6380

Srom;

Account Name : PEDRO LUZQUINOS Account Number : I20170000042 Phone : (954) 655-8413 Fax Number : (954) 432-8807

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

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## COR AMND/RESTATE/CORRECT OR O/D RESIGN CUAN CORP

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|---|--|
| TO: Amendment Section Division of Corporations  | ì  |
| NAME OF CORPORATION: CUAN CORP  |  |
| DOCUMENT NUMBER: P17000063948   |  |
| The enclosed Articles of Amendment and fee are submitte   | d for filing.  |
| Please return all correspondence concerning this matter to                                      | the following:   |
| ALBERTO J CUAN  |  |
| N.  | ne of Contact Person   |
| 8670 TAFT STREET  | Firm/ Company  |
| PEMBROKE PINES , FL 33024   | Address  |
| City  | / State and Zip Code   |
| PLUZQUINOSF@HOTMAIL.COM   |  |
| E-mail address: (to be used for   | future annual report notification)   |
| For further information concerning this matter, please call:                                    |  |
| PEDRO LUZQUINOS   | at () 655-8413   |
| Name of Contact Person  | Area Code & Daytime Telephone Number   |
| Enclosed is a check for the following amount made payable                                       | to the Florida Department of State:  |
| Certificate of Status Ce  | 5.75 Filing Fee & S52.50 Piling Fee rtified Copy Certificate of Status ditional copy is Certified Copy (Additional Copy is enclosed) |
| Mailing Address Amendment Section Division of Corporations P.O. Box 6327 Tallahassee, Fl. 32314 | Street Address Amendment Section Division of Corporations Clifton Building 2661 Executive Center Circle Tallahassee, FL 32301        |

1 >> 850-617-6381 [H 1900017-10633

Articles of Amendment

to

Articles of Incorporation

| CUAN CORP  |                                 |  |                                       | ٠.                         |
|--|---------------------------------|--|---------------------------------------|----------------------------|
| ( <u>Name of</u>   | Corporation                     | s currently filed with the Flor                | ida Dept. of State)                   | e                          |
| P17000063948   |                                 |  | <del></del>                           | <u>"``</u> `\$             |
|  | (Documen                        | Number of Corporation (if know                 | wn)                                   |                            |
|  |                                 |  | •                                     |                            |
| rursuant to the provisions of section 607.10 is Articles of Incorporation:             | 006, Florida St                 | tutes, this Florida Profit Corpu               | ration adopts the follow              | ving amendment(            |
| . If amending name, enter the new name   | e of the corp                   | ration;  |                                       |                            |
| NOVATEK CORP   |                                 |  |                                       | The new                    |
| ame must he distinguishable and contain  | in the word                     | corporation," "company," or                    | "incorporated" or the                 | abbreviation               |
| Corp.," "Inc.," or Co.," or the designat<br>ord "chartered," "professional associatio  | ion "Corp," '<br>n," or the abl | lnc," or "Co". A professional reviation "P.A." | corporation name mus                  | st contain the             |
| Enter new principal office address, if   |                                 | 8670 TAFT STRE                                 | EET                                   |                            |
| Principal office uddress MUST BE A STR   | REET ADDRE                      | PEMBROKE PIN                                   | ES, FL 33024                          |                            |
|  |                                 |  |                                       |                            |
| Enter new mailing address, if applica  |                                 | 8670 TAFT STRE                                 | EET                                   |                            |
| (Mailing address MAY HE A POST OFFICE B()X)  |                                 | PEMBROKE PIN                                   | ES, FL 33024                          | <del></del>                |
|  |                                 | <del></del>                                    |                                       | <del></del>                |
| . If amending the registered agent and/o   | or registered                   | ffice address in Florida, enter                | the name of the                       | <del>-</del> . <del></del> |
| new registered agent and/or the new r  | egistered offi                  | e address:                                     | · · · · · · · · · · · · · · · · · · · |                            |
| Name of New Registered Agent   | J.HERTO J C                     | JAN  |                                       | _                          |
| _  |                                 |  |                                       | _                          |
| e.   | 670 TAPT PT                     | Florida street address)<br>www                 | 22024                                 |                            |
| New Registered Office Address: 00  | 670 TAFT ST                     |  | , Florida                             |                            |
|  |                                 | (City)   | (Zi;                                  | o Code)                    |
|  |                                 |  |                                       |                            |
|  |                                 |  |                                       |                            |
| ew Registered Agent's Signature, if char<br>hereby accept the appointment as registere | nging Registe:                  | ed Agent:                                      | liantinus of the monition             |                            |
| ereny accept the appointment as registere  | u ageni. Tun                    | јатинг жин апа ассері іне оп                   | nganans of the position.              | •                          |
| <b>.</b> \(\lambda   |                                 |  |                                       |                            |
| X  | (                               |  |                                       |                            |
|  | l <u>Simmer</u>                 | of New Registered Agent, if che                | ามต่างส                               |                            |
|  | · Eriaini                       | ty itt - rugisioi cu rigorii, ij oni           |                                       |                            |
|  |                                 |  |                                       |                            |

## H 19 000 17 106 33

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 un 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 carporation, 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              | PT           | John Doe    |             |                       |
|-------------------------------|--------------|-------------|-------------|-----------------------|
| X Remove                      | <u>V</u>     | Mike Jones  |             |                       |
| X Add                         | <u>sv</u>    | Sally Smith |             |                       |
| Type of Action<br>(Check One) | <u>Title</u> | Name        |             | <u>Addres</u> s       |
| 1) Change                     | Т            | MARIA G     | SANCHEZ     | 7332 BYRON AVE APT 10 |
| X Add                         |              |             |             | MIAMI BEACH, FL 33141 |
| Remove                        |              |             |             |                       |
| 2) Change                     |              | <del></del> |             |                       |
| Add                           |              |             |             |                       |
| Remove                        |              |             |             |                       |
| 3) Change                     |              |             |             |                       |
| Add                           |              |             |             |                       |
| Remove                        |              |             |             |                       |
| 4) Change                     |              |             |             |                       |
| Add                           |              |             |             |                       |
| Remove                        |              |             |             |                       |
| 5) (Change                    |              | ·· — — —    |             |                       |
| Add                           |              |             |             |                       |
| Remove                        |              |             |             |                       |
| 6) Change                     |              |             |             |                       |
| Add                           |              |             |             |                       |
| Remove                        |              |             |             |                       |
|                               |              |             | Page 2 of 4 |                       |

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| E. If amending or adding additional Articles, enter change(s) here:  (Attach additional sheets, if necessary). (Be specific) |                                       |
|--|---------------------------------------|
| CHANGE OF ADDRESS FOR:   |                                       |
| Title P. CUAN, ALBERTO J   |                                       |
| OLD ADDRESS: 19400 TURNBERRY WAY APT. 1821 AVENTURA, FL 33180  |                                       |
| NEW ADDRESS: 8670 TAFT STREET PEMBROKE PINES FL 33024  |                                       |
|  |                                       |
|  | <del></del>                           |
|  | <del>.</del>                          |
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|  |                                       |
|  |                                       |
| . If 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, indicare N/A)  |                                       |
|  |                                       |
|  |                                       |
|  |                                       |
|  |                                       |
|  |                                       |
|  |                                       |
|  |                                       |
|  |                                       |

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| The date of each amendment(s) adoption:  OSZ2R/2019  Effective date if applicable:  OSZ2R/2019  (no more than 90 days after amendment file date)  Nate: If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as the document's effective date on the Department of State's records.  Adoption of Amendment(s)  (CHECK ONE)  The amendment(s) was/were adopted by the shareholders. The number of votes east 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 statement must be separately provided for each voting group entitled to vote separately on the amendment(s):  "The number of votes east for the amendment(s) was/were sufficient for approval by  Ivoting group  To amendment(s) was/were adopted by the board of directors without shareholder action and shareholder action was not required.  OSZ2R/2019  Dated  Signature  OSZ2R/2019  ALBERTO J CUAN  (Typed or printed name of person signing)  PRESIDENT  (Title of person signing) | 05/28/2019  |  |
|---|---|--|
| Effective date if applicable:  (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 date will not be listed as the document's effective date on the Department of State's records.  Adoption of Amendment(s)  (CHECK ONE)  The amendment(s) was/were adopted by the shareholders. The number of votes east for the amendment(s) by the shareholders was/were approved by the shareholders through voting groups. The following statement must be separately provided for each voting group entitled to vote separately an the amendment(s):  "The number of votes cast for the amendment(s) was/were sufficient for approval by  | The date of each amendment(s) adoption:   | if other than the  |
| Note: If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as the document's effective date on the Department of State's records.  Adoption of Ameadment(s)  (CHECK ONE)  The amendment(s) was/were adopted by the shareholders. The number of votes east 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 statement must be separately 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   | Effective date if applicable;   |  |
| Adoption of Amendment(s)  (CHECK ONE)  The amendment(s) was/were adopted by the shareholders. The number of votes east 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 statement must be separately provided for each voting group entitled to vote separately on the amendment(s):  "The number of votes east for the amendment(s) was/were sufficient for approval by   | (no mor   | t than 90 days after amenament file date)  |
| The amendment(s) was/were adopted by the shareholders. The number of votes east 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 statement must be separately provided for each voting group entitled to vote separately on the amendment(s):  "The number of votes east 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 shareholder action was not required.  The amendment(s) was/were adopted by the incorporators without shareholder action and shareholder action was not required.  O5/28/2019  Dated  O5/28/2019  Dated  ALBERTO J CUAN  (Typed or printed name of person signing)  PRESIDENT  | Note: If the date inserted in this block does not meet the document's effective date on the Department of State's rec | e applicable statutory filing requirements, this date will not be listed as the lords. |
| by the shareholders was/were approved by the shareholders through voting groups. The following statement must be separately 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   | Adoption of Amendment(s) (CHECK ON  | E)   |
| "The number of votes cast for the amendment(s) was/were sufficient for approval  hy   |   | prs. The number of votes east for the amendment(s)                                     |
| hy  |   |  |
| The amendment(s) was/were adopted by the board of directors without shareholder action and shareholder action was not required.  The amendment(s) was/were adopted by the incorporators without shareholder action and shareholder action was not required.  O5/28/2019  Dated  O5/28/2019  Dated  OS/28/2019  Dated  OS/28/2019  Alirector, 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)  ALBERTO J CUAN  (Typed or printed name of person signing)  PRESIDENT   | "The number of votes east for the amendment(s)  | <br>was/were sufficient for approval<br>   |
| The amendment(s) was/were adopted by the board of directors without shareholder action and shareholder action was not required.  The amendment(s) was/were adopted by the incorporators without shareholder action and shareholder action was not required.  O5/28/2019  Dated  O5/28/2019  Dated  OS/28/2019  Dated  OS/28/2019  Alirector, 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)  ALBERTO J CUAN  (Typed or printed name of person signing)  PRESIDENT   | by  | n  |
| action was not required.  The amendment(s) was/were adopted by the incorporators without shareholder action and shareholder action was not required.  O5/28/2019  Dated  O5/28/2019  Dated  (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)  ALBERTO J CUAN  (Typed or printed name of person signing)  PRESIDENT  | (voting group,  |  |
| 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 court appointed fiduciary by that fiduciary)  ALBERTO J CUAN  (Typed or printed name of person signing)  PRESIDENT   |   | <br> rectors without shareholder action and shareholder                                |
| 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 court appointed fiduciary by that fiduciary)  ALBERTO J CUAN  (Typed or printed name of person signing)  PRESIDENT   |   | ors without shareholder action and shareholder   |
| 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 court appointed fiduciary by that fiduciary)  ALBERTO J CUAN  (Typed or printed name of person signing)  PRESIDENT   | 05/28/2019  |  |
| (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)  ALBERTO J CUAN  (Typed or printed name of person signing)  PRESIDENT  | Dated   | <u> </u>   |
| (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)  ALBERTO J CUAN  (Typed or printed name of person signing)  PRESIDENT  | A-1   |  |
| selected, by an incorporator if in the hands of a receiver, trustee, or other court appointed fiduciary by that fiduciary)  ALBERTO J CUAN  (Typed or printed name of person signing)  PRESIDENT  | Signature Symptom president or of   | res officer - if directors or officers have not have                                   |
| (Typed or printed name of person signing) PRESIDENT   |   |  |
| (Typed or printed name of person signing) PRESIDENT   | appointed fiduciary by that fid   | fuciary)   |
| PRESIDENT   | ALBERTO I CUAN  |  |
|   | (Typed or   | rinted name of person signing)   |
| (Title of person signing)   | PRESIDENT   |  |
|   |   | (Title of person signing)  |

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