P17000 065 961

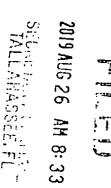
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COVER LETTER

TO: Amendment Section Division of Corporations

NAME OF CORPO	RATION: MORALES & HIJ	OS INC	
DOCUMENT NUMI	P17000065961		
The enclosed Articles	of Amendment and fee are su	bmitted for filing.	
Please return all corre	spondence concerning this ma	tter to the following:	
	ALEXANDER EMMANUE	L LUNA	
		Name of Contact Person	1
		Firm/ Company	
	1128 COBBLESTONE CIR.	APT H	
	KISSIMMEE, FL 34744	Address	
	·	City/ State and Zip Code	<u></u>
PDA	CEVEDO85@GMAIL.COM	•	
	-	sed for future annual report	notification)
For further information	n concerning this matter, pleas		150_2505
		at (407	
	of Contact Person or the following amount made		de & Daytime Telephone Number
■ \$35 Filing Fee	□\$43.75 Filing Fee & Certificate of Status	S43.75 Filing Fee & Certified Copy (Additional copy is enclosed)	□\$52.50 Filing Fee Certificate of Status Certified Copy (Additional Copy is enclosed)
Am Div P.O	iling Address endment Section ision of Corporations . Box 6327 ahassee, FL 32314	Amend Divisio Clifton 2661 E	Address Iment Section on of Corporations Building Executive Center Circle Essee, FL 32301

Articles of Amendment to Articles of Incorporation of

MORALES & HIJOS INC				
(Name of Corporation as curr	ently filed with the Florida Dept. of State	<u>e</u>)		
P17000065961				
(Document Number	er of Corporation (if known)			
Pursuant to the provisions of section 607.1006, Florida Statutes, t its Articles of Incorporation:	this Florida Profit Corporation adopts the	following	amend	lment(s) to
A. If amending name, enter the new name of the corporation	<u>:</u>			
			The n	teve
name must be distinguishable and contain the word "corpore" ("Corp.," "Inc.," or Co.," or the designation "Corp.," "Inc.," oword "chartered," "professional association," or the abbreviation	or "Co". A professional corporation nam	or the abo	breviat	ion
B. Enter new principal office address, if applicable: (Principal office address MUST BE A STREET ADDRESS)				_
				_
C. Enter new mailing address, if applicable: (Muiling address MAY BE A POST OFFICE BOX)		전투	201	
			Aug ,	
		S	26 A	
D. If amending the registered agent and/or registered office a new registered agent and/or the new registered office add			AH 8:	
Name of New Registered Agent	<u></u>	;; ;	ယ ယ	
(Florid	a street address)			
New Registered Office Address:	Florida			_
	(City)	(Zip Ci	ode)	
New Registered Agent's Signature, if changing Registered Ag I hereby accept the appointment as registered agent. I am familia		osition.		
Signature of Ne	w 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	<u>V</u>	Mike Jones	
X Add	<u>sv</u>	Sally Smith	
Type of Action (Check One)	<u>Title</u>	<u>Name</u>	Address
1) Change	P	SEBASTIAN A MORALES	1128 COBBLESTONE CIR APT H
Add			KISSIMMEE, FL 34744
X Remove			
2) Change	P	ALEXANDER EMMANUEL LUNA	1128 COBBLESTONE CIR APT H
X Add			KISSIMMEE, FL 34744
Remove			
3) Change			
Add			
Remove			<u></u>
4) Change			
Add			
Remove			
5) Change			
Add			
Remove			
6) Change			
Add			
Remove			

(Attac	ch additional sheets, if necessary). tBe specific)
-	
16	amendment provides for an exchange, reclassification, or cancellation of issued shares,
pro	visions for implementing the amendment if not contained in the amendment itself:
	(if not applicable, indicate N/A)
_	

	08/21/2019	
The date of each amendment(s)	adoption:	, if other than the
date this document was signed.		
	/21/2019	
Effective date <u>if applicable</u> :	(no more than 90 days after amendment file date)	
Note: If the date inserted in this document's effective date on the l	block does not meet the applicable statutory filing requirements, this date 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 a by the shareholders was/were	dopted by the shareholders. The number of votes east for the amendment(s sufficient for approval.	•)
	pproved by the shareholders through voting groups. The following stateme or each voting group entitled to vote separately on the amendment(s):	nt
	st for the amendment(s) was/were sufficient for approval	
by	(voting group)	
	(voting group)	
action was not required.	dopted by the board of directors without shareholder action and shareholde dopted by the incorporators without shareholder action and shareholder	r
•	2010	
08/21/ Dated		
Signature		
(By a selec	director, president or other fifteer – if directors or officers have not been ted, by an incorporator – if in the hands of a receiver, trustee, or other cour inted fiduciary by that fiduciary)	t
	PAMELA ACEVEDO	
	(Typed or printed name of person signing)	
	SECRETARY	
	(Title of person signing)	