

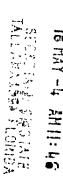
(Re	equestor's Name)			
(Ac	ddress)	<u>"</u> .		
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	☐ WAIT	MAIL		
(Bu	usiness Entity Nan	ne)		
(Do	ocument Number)			
Certified Copies	_ Certificates	of Status		
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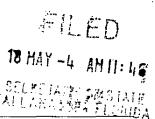
MAY 0 8 2018

COVER LETTER

TO: Amendment Section Division of Corporations

NAME OF CORPOR	ATION:	& MIGDALIA, INC.	
DOCUMENT NUMB	ER: P17000067023		
The enclosed Articles of	of Amendment and fee are sul	bmitted for filing.	
Please return all corres	pondence concerning this mat	ter to the following:	
	ADAN DUARTE		
-		Name of Contact Person	1
	DUARTE ADAN & MIGDA		
	4549 PHILADELPHIA CIR	Firm/ Company	
		Address	
	KISSIMMEE, FLORIDA 34	746	
•		City/ State and Zip Cod	e
RM	UNIZ6724@AOL.COM		
	-	to be used for future annua	Leaport notification)
	r,-man address. (to be used for father annua	report normeation)
For further information	concerning this matter, pleas	se call:	
ADAN DUARTE		407 at (301-7031
Name of Contact Person		at (
Enclosed is a check fo	r the following amount made	payable to the Florida Dep	artment of State:
□ \$35 Filing Fee	□\$43.75 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)
Ame Divi P.O.	ling Address endment Section sion of Corporations Box 6327 ahassee, FL 32314	Amen Divisi Cliftor 2661 I	Address dment Section on of Corporations n Building Executive Center Circle assee, FL 32301

Articles of Amendment to Articles of Incorporation of



DUARTE ADAN & MIGDALIA, INC

(Name of Corporation as	currently filed with the Flo	rida Dept, of State)	
(Documer	nt Number of Corporation (if k	nown)	
Pursuant to the provisions of section 607. Incorporation:	.1006, Florida Statutes, this co	orporation adopts the following	g amendment(s) to its Articles of
A. If amending name, enter the new na VISTA BAY, INC.	me of the corporation:		The new
name must be distinguishable and com "Corp.," "Inc.," or Co.," or the design word "chartered." "professional associa	ation "Corp," "Inc," or "Co	o". A professional corporatio	ted" or the abbreviation
B. Enter new principal office address, (Principal office address MUST BE A S	if applicable:	SAME	
i menu vijee iiiitet ii <u>neer be 19</u>	, , , , , , , , , , , , , , , , , , ,		
C. Enter new mailing address, if appli (Mailing address <u>MAY BE A POST</u>)		SAME	
D. If amending the registered agent an new registered agent and/or the new		ss in Florida, enter the name	of the
	SAME		
Name of New Registered Agent			
	(Florida stre	vet address)	
New Registered Office Address:	SAME	, Florida	(Zip Code)
	(Ciţy)		(Zip Code)
New Registered Agent's Signature, if c I hereby accept the appointment as regist		th and accept the obligations o	f the position
Si	gnature of New Registered Ag	gent, 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>b.L.</u>	John De	<u>oc</u>	
X Remove	<u>V</u>	Mike Jo	nes	
X Add	<u>sv</u>	Sally Sn	<u>nith</u>	
Type of Action (Check One)	<u>Title</u>		Name	<u>Addres</u> s
1) Change		_		
Add				Market and the second s
Remove				
2) Change	***************************************	_		V
Add				
Remove				
3) Change		101 9- /4		
Add				
Remove				
4) Change		_		
Add				
Remove				
5) Change	*	_		
Add				
Remove				
6) Change				
Add				
Remove				

	onal sheets, if necessar	ry), (Be specific)		
				<u>-</u>
			A A A A A A A A A A A A A A A A A A A	
			V., A	
f an amendme	ent provides for an ex	change, reclassification, or can	rellation of issued shares.	
provisions for	implementing the am	change, reclassification, or can endment if not contained in the	ellation of issued shares, camendment itself:	
provisions for	nt provides for an eximplementing the am licable, indicate N/A)	change, reclassification, or can tendment if not contained in the	cellation of issued shares, camendment itself:	
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provisions for	implementing the am	change, reclassification, or cannendment if not contained in the	cellation of issued shares, camendment itself:	

date this document was signed.		, if other than
Effective date if applicable:		_
(no m	ore than 90 days after amendment file date)	
Adoption of Amendment(s) (CHECK C	<u>ONE</u>)	
☐ The amendment(s) was/were adopted by the shareholders was/were sufficient for approval		
☐ The amendment(s) was/were approved by the sharehomust be separately provided for each voting group of		
"The number of votes cast for the amendment(s) was/were sufficient for approval	
by	**	
(voting gro	up)	
☐ The amendment(s) was/were adopted by the board of action was not required.	f directors without shareholder action and shareholder	
■ The amendment(s) was/were adopted by the incorpor action was not required.	rators without shareholder action and shareholder	
APRIL 23, 2018		
Dated		
Signature / /malo		_
	other officer – if directors or officers have not been or – if in the hands of a receiver, trustee, or other court t fiduciary)	
ADAN DUARTE		
(Typed)	or printed name of person signing)	-
PRESIDENT		

(Title of person signing)