P17CCCO 67151

(Re	questor's Name)	
(Ad	dress)	
(Ad	dress)	<u>. </u>
(Cit	y/State/Zip/Phone	e #)
PICK-UP	☐ WAIT	MAIL
(Bu	siness Entity Nar	ne)
(Do	cument Number)	·- <u>-</u>
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COVER LETTER

TO: Amendment Section Division of Corporations

NAME OF CORPORAT	TON: KP SERVICES AS	ND SOLUTION	CORP		
DOCUMENT NUMBER	: <u>P17000067151</u>			·	
The enclosed Articles of A		bmitted for tili	ng.		
Please return all correspon	dence concerning this ma	ster to the follo	wing:		
CA	RLOS LOVERA				
	Name of Contact Person				
		Firm/ C	Company		
138	51 RUSHING CREEK R	N			
OR	Address ORLANDO, FL 32824				
		City/ State a	and Zip Code	2	
carl	osdanielovera@gmail.cor	11			
_	E-mail address: (to be us	sed for future a	nnual report	notification)	
For further information co	ncerning this matter, pleas	se call:			
CARLOS LOVERA		at (407	627-9818	
Name of C	ontact Person	· · · · · · · · · · · · · · · · · · ·	Area Co	de & Daytime Telephone Number	
Enclosed is a check for the	following amount made	payable to the	Florida Depa	urtment of State:	
S35 Filing Fee	□\$43.75 Filing Fee & Certificate of Status	S43.75 Fi Certified ((Additiona enclosed)	Copy	☐\$52,50 Filing Fee Certificate of Status Certified Copy (Additional Copy is enclosed)	
Mailing Amendn Division P.O. Bo: Tallahas		Amend Divisio The Co	Address ment Section n of Corporations entre of Tallahassee		

Tallahassee, FL 32303

Articles of Amendment to Articles of Incorporation of

FILED

KP SERVICES AND SOLUTION CORP

2021 DEC -7 AMIL: 32

(Name of Corpora	ation as currently filed with the Florida Dept. of State) OF STATE
P17000067151	TALLAHASSEF, FLOCIE
(Doc	ument Number of Corporation (if known)
Pursuant to the provisions of section 607.1006, Flori its Articles of Incorporation:	ida Statutes, this Florida Profit Corporation adopts the following amendment(s) t
A. If amending name, enter the new name of the	corporation:
N/A	The new
	"corporation," "company," or "incorporated" or the abbreviation "Corp.," c," or "Co". A professional corporation name must contain the word
B. Enter new principal office address, if applicab	N/A
(Principal office address MUST BE A STREET AI	
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE B	N/A
D. If amending the registered agent and/or regist	tered office address in Florida, enter the name of the
new registered agent and/or the new registere	
Name of New Registered Agent N/A	
Nume of New Neglisterea Agem	
	(Florida street address)
	ir writta sireci dadress)
New Registered Office Address: 1878	, Florida
	(City) (Zip Code)
New Registered Agent's Signature, if changing R	egistered Agent
	. I am familiar with and accept the obligations of the position.
	and the Desiround Court of America
Sig	gnature of New Registered Agent, if changing
Check if applicable	
☐ The amendment(s) is/are being filed pursuant to s	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	$\overline{b.L}$	<u>John D</u>	<u>oc</u>	
X Remove	\underline{V}	Mike Jo	<u>ones</u>	
X Add	<u>sv</u>	Sally S	<u>mith</u>	
Type of Action (Check One)	<u>Title</u>		Name	<u>Addres</u> s
1) Change	D		Jonathan J. Marquez Villegas	13851 RUSHING CREEK RUN
X Add		_		ORLANDO, FL 32824
Remove				
2) Change				
Add				
Remove 3) Change		_		
Add				
Remove				
4) Change				
Add				
Remove				
5) Change				
Add				
Remove				
6) Change				
Add				
Remove				

(Au	mending or adding additional Articles, enter change(s) here: ach additional sheets, if necessary). (Be specific)
N/A	
F. <u>If a</u>	n amendment provides for an exchange, reclassification, or cancellation of issued shares, ovisions for implementing the amendment if not contained in the amendment itself:
<u>þ1</u>	(if not applicable, indicate N/A)
N/A	
	
	-

•

12/02/2021	
The date of each amendment(s) adoption:	, if other than the
date this document was signed.	
12/02/2021	
Effective date if applicable:	
(no more than 90 days after a	mendment file date)
Note: If the date inserted in this block does not meet the applicable statutory document's effective date on the Department of State's records.	y filing requirements, this date will not be listed as the
Adoption of Amendment(s) (CHECK ONE)	
The amendment(s) was/were adopted by the incorporators, or board of direct action was not required.	tors without shareholder action and shareholder
☐ The amendment(s) was/were adopted by the shareholders. The number of v by the shareholders was/were sufficient for approval.	rotes cast for the amendment(s)
☐ The amendment(s) was/were approved by the shareholders through voting g must be separately provided for each voting group entitled to vote separate	
"The number of votes east for the amendment(s) was/were sufficient f	or approval
by	
(voting group)	·
12/02/2021	
Dated	
Signature Carlos Covers	
(By a director, president or other officer - if director	
selected, by an incorporator + if in the hands of a r	eceiver, trustee, or other court
appointed fiduciary by that fiduciary)	
CARLOS LOVERA	
(Typed or printed name of perso	on signing)
PRESIDENT	
(Title of person signing)	