# PM000070652

(Re	equestor's Name)	
(Ad	ldress)	· · · · · · · · · · · · · · · · · · ·
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NOV 2 9 2017 S. YOUNG ALLANASSEE JI LONDO

#### COVER LETTER

**TO:** Amendment Section Division of Corporations

NAME OF CORPORATION: Laevi	table Sales Inc.			
DOCUMENT NUMBER: PIDOOC				
The enclosed Articles of Amendment and fee a	re submitted for tiling.			
Please return all correspondence concerning this	s matter to the following:			
Terre	Name of Contact Person			
Inevitable Sales Inc				
Thev: table Sales Inc Firm/Company P.O. Box 790737 Address				
	Chy/State and Zin Code			
	City, State and Zip Code			
Dugh + E-mail address: (to b	1) a gmail, Com pe used fur future annual report notification)			
For further information concerning this matter, p	please call:			
Terrell Ruch	305, 910-7964			
Name of Contact Person	at ( <u>305</u> ) <u>910-7969</u> Area Code & Daytime Telephone Number			
Enclosed is a check for the following amount ma	ade payable to the Florida Department of State:			
\$35 Filing Fee				
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

### Articles of Amendment Articles of Incorporation

## Sales Inc

P17000070	365 <del>2</del>
(Document Number of C	Corporation (if known)
Pursuant to the provisions of section 607,1006, Florida Statutes, this $Fl$ its Articles of Incorporation:	Porida Profit Corporation adopts the following amendment(s) to
A. If amending name, enter the new name of the corporation:	
	Thenew
name must be distinguishable and contain the word "corporation, "Corp.," "Inc.," or Co.," or the designation "Corp," "Inc," or "Coword "chartered," "professional association," or the abbreviation "P.	2. A professional corporation name must contain the
B. <u>Enter new principal office address, if applicable:</u> (Principal office address <u>MUST BE A STREET ADDRESS</u> )	10735 SW 216th Street Unit412 Migmi, Fl 33170
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)	TALL BASSES
D. If amending the registered agent and/or registered office address new registered agent and/or the new registered office address:	ss in Florida, enter the name of the
Name of New Registered Agent	
(Florida street	address)
New Registered Office Address:	Florida
$\epsilon C$	(Zip Code)
New Registered Agent's Signature, if changing Registered Agent: I hereby accept the appointment as registered agent.—I am familiar wit	h and accept the obligations of the position.

Signature of New 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: XChange	PT John Doe	
X Remove	<u>V</u> <u>Mike Jones</u>	
X Add	SV Sally Smith	
Type of Action (Check One)	<u>Title</u> <u>Name</u>	<u>Addres</u> s
1) Change	DP Terrell Pugh Sr	1567 SE 20th Road
Add	Ž	Homestead, Fl 33035
<u> </u>		
2) Change	DP Terrell Pugh	10735 SW 216 th St Unit 412
💢 Add	·	Miami, F1 33170
Remove		
3 ) Change		
Add		
Remove		
4) Change		
Add		
Remove		
5) Change		
Add		
Remove		
6) Change		<del></del>
Add		
Remove		

If amending or adding additional Art (Attach additional sheets, if necessary).	icles, enter change(s) here: (Be specific)
- <del>/</del> -/-\	····
IVA	
, -	
<del></del>	
If an arrandonna manida for an arrand	hanna madaadaanaa ka k
provisions for implementing the ame	hange, reclassification, or cancellation of issued shares, endment if not contained in the amendment itself:
(if not applicable, indicate N/A)	
<b>N/N</b>	
NH	

	, if other than the
date this document was signed.	
Effective date if applicable: 11/29/2017 (no more than 90 days after amends	
in the second of	nent file date)
Note: If the date inserted in this block does not meet the applicable statutory filing document's effective date on the Department of State's records.	requirements, this date will not be listed as the
Adoption of Amendment(s) ( <u>CHECK ONE</u> )	
☐ The amendment(s) was/were adopted by the shareholders. The number of votes ca by the shareholders was/were sufficient for approval.	st for the amendment(s)
☐ The amendment(s) was/were approved by the shareholders through voting groups.  must be separately provided for each voting group entitled to vote separately on t	
"The number of votes cast for the amendment(s) was/were sufficient for appr	oval
by	··
(voting group)	
☐ The amendment(s) was/were adopted by the board of directors without shareholder action was not required.  ☐ The amendment(s) was/were adopted by the incorporators without shareholder action.	
action was not required.	
Dated 11/22/2017 Signature 1 Pa	
(By a directed, president or other officer – if directors or of selected, by an incorporator – if in the hands of a receiver	
appointed fiduciary by that fiduciary)	
Terrell Pugh S- (Typed or printed name of person sign	
(Typed or printed name of person sign	ing)
President/Director (Title of person signing)	
(Title of person signing)	