P17000082372

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COVER LETTER

TO: Amendment Section Division of Corporations

NAME OF CORPO	DRATION: ESP 9999, INC.		<u></u>
DOCUMENT NUM	P17000082372		
The enclosed Article	es of Amendment and fee are su	bmitted for filing.	
Please return all cor	respondence concerning this ma	tter to the following:	
	Omar Fuentes Rodriguez		
	-	Name of Contact Person	1
	ESP 9999, INC.		
		Firm/ Company	
	3880 Bird Road, 424, Cora	al Gables.	
		Address	
	Miami, Florida 33146		
	·	City/ State and Zip Cod	e
om	arfuentes@jimenezzuniga.co	om	
	<u> </u>	sed for future annual report	notification)
For further informat	ion concerning this matter, pleas	se call:	
Omar Fuentes Ro	driguez	+52998 at (2423936
Nam	e of Contact Person	Area Co	de & Daytime Telephone Number
Enclosed is a check	for the following amount made	payable to the Florida Depa	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)
A D P.	mendment Section ivision of Corporations O. Box 6327 allahassee, FL 32314	Amenc Divisio Clifton	Address Iment Section on of Corporations Building Executive Center Circle

Tallahassee, FL 32301

MALES OF CONTROLLS

MAN 3 MIL. S.

Articles of Amendment to Articles of Incorporation of

ESP 9999, INC. (Name of Corporation as currently filed with the Florida Dept. of State) P17000082372 (Document Number of Corporation (if known) Pursuant to the provisions of section 607.1006, Florida Statutes, this Florida Profit Corporation adopts the following amendment(s) to its Articles of Incorporation: A. If amending name, enter the new name of the corporation: Jimenez & Zuniga Comercializadora Internacional de Minerales, Inc. The new name must be distinguishable and contain the word "corporation," "company," or "incorporated" or the abbreviation "Corp.," "Inc.," or Co.," or the designation "Corp." "Inc." or "Co". A professional corporation name must contain the word "chartered," "professional association," or the abbreviation "P.A." B. Enter new principal office address, if applicable: (Principal office address MUST BE A STREET ADDRESS) C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX) D. If amending the registered agent and/or registered office address in Florida, enter the name of the new registered agent and/or the new registered office address: Name of New Registered Agent (Florida street address) New Registered Office Address: , Florida (City) (Zip Code) New Registered Agent's Signature, if changing Registered Agent: I hereby accept the appointment as registered agent. I am familiar with 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: X Change	<u>PT</u>	John Doe	
X Remove	<u>V</u>	Mike Jones	
X Add	<u>sv</u>	Sally Smith	
Type of Action (Check One)	<u>Title</u>	Name	<u>Addres</u> s
1) Change			
Add			
Remove			
2) Change			
Add			
Remove			
3) Change			
Add			
Remove			
4) Change			
Add			
Remove			
5) Change			
Add			
Remove			
Kelliove			
6) Change		_	
Add			
Remove			

Mach <i>additiona</i>	dding additional Art I sheets, if necessary).	(Be specific)				
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f	t provides for an exc	hanna madamic				
provisions for i	mplementing the am-	endment if not co	ontained in the a	mendment itself	<u>nares, : </u>	
(if not appli	icable, indicate N/A)					
		·				
	-					
						-

The date of each amendment(s) ado date this document was signed.	ption:	, if other than the
Effective date <u>if applicable</u> :		
	(no more than 90 days after amendment file date)	
Note: If the date inserted in this blo document's effective date on the Department	ock does not meet the applicable statutory filing requirements, this artment of State's records.	date will not be listed as the
Adoption of Amendment(s)	(<u>CHECK ONE</u>)	
■ The amendment(s) was/were adop by the shareholders was/were suft	ted by the shareholders. The number of votes east for the amendment icient for approval.	nt(s)
	oved by the shareholders through voting groups. The following state ach voting group entitled to vote separately on the amendment(s):	ment
"The number of votes east fo	or the amendment(s) was/were sufficient for approval	
by	<u> </u>	
	(voting group)	
action was not required.	ted by the board of directors without shareholder action and shareholder ted by the incorporators without shareholder action and shareholder	lder
action was not required.	of the mean position without similar to the single sind control and sind c	
05/28/2018		
Dated	mar Truent	
selected,	ector, president or other officer – if directors or officers have not bee by an incorporator – if in the hands of a receiver, trustee, or other co d fiduciary by that fiduciary)	
C	Omar Fuentes Rodriguez	
_	(Typed or printed name of person signing)	
F	President	
_	(Title of person signing)	