P17000082379

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(C	City/State/Zip/Phone #)	
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☐ PICK-UP	☐ WAIT	MAIL
(E	Business Entity Name)	
	Document Number)	
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Special Instructions t	o Filing Officer:	
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COVER LETTER

TO: Amendment Section Division of Corporations

	TEZOTTO SERV	ICES INC				
NAME OF CORPO	RATION: P170000082379					
DOCUMENT NUM	BER:			ų		
The enclosed Articles	of Amendment and fee are su	bmitted for filing.				
Please return all corre	espondence concerning this ma	itter to the following:				
	FERNANDO FONSECA					
		Name of Contact Perso	n	J		
	4394 NW 9TH AVE APT 3	Firm/ Company 337 BLG 21				
	Address POMPANO BEACH - FLORIDA 33064					
	Ternando - FONSE E-mail address: (City/ State and Zip Cod				
For further informatic	on concerning this matter, pleas	se call:				
FERNANDO FONS	SECA	732 at (527-5521	}		
Name	of Contact Person	Area Co	ode & Daytime Telephone Number	_		
Enclosed is a check for	or 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)			

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 to Articles of Incorporation of

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(Name of Corporation as currently fil P17000082379	led with the Florida Dept. of State)
(Document Number of)	Corporation (if known)
Pursuant to the provisions of section 607.1006. Florida Incorporation:	a Statutes, this <i>corporation</i> adopts the following amendment(s) to its Articles
A. If amending name, enter the new name of the con	rporution:
	The new
name must be distinguishable and contain the word "Corp.," "Inc.," or Co.," or the designation "Corp, word "chartered," "professional association," or the c	d "corporation," "company," or "incorporated" or the abbreviation " "Inc," or "Co". A professional corporation name must contain the abbreviation "P.A."
B. <u>Enter new principal office address,</u> if <u>applicable:</u> (Principal office address <u>MUST BE A STREET ADD</u>	
	··································
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX	<u> </u>
D. If amending the registered agent and/or registered new registered agent and/or the new registered of	
Name of New Registered Agent	
	(Florida street address)
New Registered Office Address:	, Florida
	(City) (Zip Code)
	1
New Registered Agent's Signature, if changing Regi	istered Agent: I am familiar with and accept the obligations of the position.
nerco, accept the appointment as registered agent. 1	um juminos wan unu uccept the torngulums to the position.
	
Signature of New	w Registered Agent, if changing

P = President; V = Vice Executive Officer; CFC held. President, Treasu Changes should be note a change, Mike Jones la Mike Jones, V as Remo	ts, if neces director tit e Presiden) = Chief rer, Direct ed in the fa eaves the c	ssary) tle by the first letter of the office title; ht; T= Treasurer; S= Secretary; D= Director; Financial Officer. If an officer/director holds tor would be PTD. ollowing manner. Currently John Doe is listed	TR= Trustee; C = Chairman or Clerk; GEO = Chief is more than one title, list the first letter of each office as the PST and Mike Jones is listed as the V. There is These should be noted as John Doe, PT as a Change,
Example: X Change	<u>PT</u>	John Doe	
X Remove	<u>V</u>	Mike Jones	
X Add	<u>sv</u>	Sally Smith	4
Type of Action	<u>Title</u>	<u>Name</u>	Address
(Check One) 1) Change	P	FERNANDO FONSECA	4394 NW 9TH AVE APT 337 BLG 21
X Add			POMPANO BEACH - FL 33064
Remove			
2) Change	D	DAIANA MARIA TEZOTTO	4394 NW 9TH AVE APT 3 37. BLG 21
X Add			POMPANO BEACH - FLORIDA 33064
Remove			
3) Change			
Add			
Remove			
4) Change	J		
Add			
Remove			
5) Change			
Add			
Remove			!
6) Change			
Add			
Remove			

If amending the Officers and/or Directors, enter the title and name of each officer/director being removed and title, name, and

G. If amending or adding additional Articles, enter change(s) here: (Attach additional sheets, if necessary). (Be specific)
(Mach daditional sheets, if necessary). (Be specific)
DI FACE ADD THE DECIDENT FERNANDO FONCECA
PLEASE ADD THE PRSIDENT FERNANDO FONSECA
PLEASE ADD THE DIRECTOR DAIABA MARIA TEZOTTO
AND PLEASE ADD THE EIN NUMBER 82-3089710

H. If an amendment provides for an exchange, reclassification, or cancellation of issued shares,
provisions for implementing the amendment if not contained in the amendment itself: (if not applicable, indicate N/A)
ty and approximation from

The date of each amendment(s) adoption:	, if other than the
date this document was signed. 10/20/2017	
Effective date if applicable:	_
(no more than 90 days after amendment file date)	
Adoption of Amendment(s) (CHECK ONE)	
The amendment(s) was/were adopted by the shareholders. The number of votes cast for the amendment(s) by the shareholders was/were sufficient for approval.	
☐ The amendment(s) was/were approved by the shareholders through voting groups. The following statement must be separately provided for each voting group entitled to vote separately on the amendment(s):	1
"The number of votes cast for the amendment(s) was/were sufficient for approval	
by	;
(voting group)	1
■ The amendment(s) was/were adopted by the board of directors without shareholder action and shareholder action was not required.	
☐ The amendment(s) was/were adopted by the incorporators without shareholder action and shareholder action was not required.	
10/20/2017	
Dated	
(By a director, president of other officer – if directors or officers have not been selected, by an incorporator – if in the hands of a receiver, trustee, or other court appointed fiduciary by that fiduciary)	
FERNANDO FONSECA	. :
(Typed or printed name of person signing)	
PRESIDENT	
(Title of person signing)	

10/20/2017