P17000045138

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): Amendment Section Division of Corporations

Tallahassee, FL 32314

AME OF CORPORATION:	ERVICES CORP	_ _	
P1700009513 OCUMENT NUMBER:	· · · · · · · · · · · · · · · · · · ·	. <u></u>	
ne enclosed Articles of Amendment and	fee are submitted for fili	ng.	
ease return all correspondence concernir	ng this matter to the follo	wing:	
OSE LEON			
	(Name of Co	ontact Person)	
BS - LEON BUSINESS SERVICES LL	C		
	(Firm/ C	Company)	<u> </u>
333 W MCNAB RD STE 115			
	(Ado	iress)	
AMARAC FL 33321			
	(City/ State :	ınd Zip Code)	
LS.OFFICE@LEONBUSINESERVICE	S.COM		
E-mail address:	(to be used for future ar	nual report noti	fication)
or further information concerning this ma	itter, please call:		
OSE LEON		954 at	3239074
(Name of Cor	itact Person)	(Area (Code) (Daytime Telephone Number)
nclosed is a check for the following amo	unt made payable to the	Florida Departn	nent of State:
■ \$35 Filing Fee □\$43.75 Fil Certificate	-	Copy il copy is	3852.50 Filing Fee Certificate of Status Certified Copy (Additional Copy is Enclosed)
Mailing Address Amendment Section Division of Corporation P.O. Box 6327	S		

2415 N. Monroe Street, Suite 810

Tallahassee, FL 32303

Articles of Amendment to Articles of Incorporation of

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me of Corporation as currently filed with the	: Florida [Dept. of State)	
7000095138			
(Docum	nent Numb	er of Corporation (if known)	
muant to the provisions of section 617.1006, Flo indment(s) to its Articles of Incorporation:	rida Statute	es, this Florida Not For Profit	Corporation adopts the following
If amending name, enter the new name of the	e corporat	ion:	
			The new
e must be distinguishable and contain the word mpany" or "Co." may not be used in the name	-	tion" or "incorporated" or the	abbreviation "Corp." or "Inc."
Enter new principal office address, if applica	hle:	12148 W Sample Rd, Coral S	prings, FL 33065
ncipal office address MUST BE A STREET A)	
			<u> </u>
Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE)	<u>BOX</u>)	12148 W Sample Rd, Coral S	prings, FL 33065
If amending the registered agent and/or regis			e name of the
new registered agent and/or the new register			
Name of New Registered Agent:	EDGAR I	PUEKTA	
	12148 W	Sample Rd, Coral Springs, FL	33065
(Florida street address)		t address)	
<u>New Registered Office Address:</u>	13140 W	Compale D.I. Complete in	2707
	12146 W	Sample Rd, Coral Springs	, Florida
		(City)	(Zip Code)
Registered Agent's Signature, if changing Is reby accept the appointment as registered agen			gations of the position.
•	-		
_		245	
	Si	gnature of New Registered Age	nt. if changing

Presidem, Treas	urer, Director wo	uld be PTD.	than one title, list the first letter of each office by PST and Mika longs is listed as the V. There is
nge, Mike Jones	teaves the corpor	g manner. Currently John Doe is listed as lation, Sally Smith is named the V and S. The tith, SV as an Add.	he PST and Mike Jones is listed as the V . There is see should be noted as John Doc, PT as a Change.
ple. range rmove .dd	$\overline{\underline{\mathbf{V}}}$ $\underline{\underline{\mathbf{Mik}}}$	n Doe te Jones y Smith	
<u>of Action</u> k One)	<u>Title</u>	<u>Name</u>	<u>Addres</u> s
Change Add	P	LOPEZ OCANTO, JORGE A	Davie, FL 33325
Remove Change Add	<u>P</u>	PUERTA, EDGAR	12148 W Sample Rd. Coral Springs, FL 33065
Remove Change Add Remove	<u>VP</u>	SUAREZ, OSMERLY	12148 W SAMPLE RD Coral Springs, FL 33065
Change Add			
Remove			
Change Add			
Remove			
Change Add			
Remove	dding additional	Page 2 of 4 Articles, enter change(s) here:	
	sheets, if necessar		

lending the Officers and/or Directors, enter the title and name of each officer/director being removed and title that he

ddress of each Officer and/or Director being added:

h additional cheets, if necessary)

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Page 3 of 4	
rage 5 of 4	
late of each amendment(s) adoption:	if other than the
his document was signed.	, it vales that the
tive date if applicable: (no more than 90 days after amendment fi	In Later
(no more than 90 days after amendment fi	ie aaie)
If the date inserted in this block does not meet the applicable statutory filing reent's effective date on the Department of State's records.	equirements, this date will not be listed as the

The amendment(s) was/were adopted by the members and the number of votes cast for the amendment(s) ras/were sufficient for approval.

(CHECK ONE)

tion of Amendment(s)

There are no members or members entitled to vote on the amendment(s). The amendment(s) was/were adopted by the board of directors.

Datec	11/26/2019				
Signatur	(By the chairman or vice chairman of the board, president or other officer-if directors have not been selected, by an incorporator – if in the hands of a receiver, trustee, or other court appointed fiduciary by that fiduciary)				
	(Typed or printed name of person signing)				
	Typed of printed name of person signing)				
	(Title of person signing)				