P17000101560

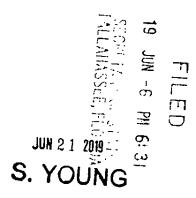
(Red	questor's Name)	
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COVER LETTER

TO: Amendment Section
Division of Corporations

•

NAME OF CORPORATION: UNIVISTA AD	OVERTISING GROUP, INC.
DOCUMENT NUMBER: P17000101560	
The enclosed Articles of Amendment and fee are	e submitted for filing.
Please return all correspondence concerning this	matter to the following:
YAQUELIN BOULANDI	IER
	Name of Contact Person
UNIVISTA ADVERTISI	NG GROUP, INC.
	Firm/ Company
5701 COLLINS AVENUE	E APT 717
	Address
MIAMI BEACH FL 33	140
	City/ State and Zip Code
SARABIA0616@GMAIL.COM	I
E-mail address: (to be	e used for future annual report notification)
For further information concerning this matter, pl	lease valle
To raidle mornation concerning this matter, pr	ease carr.
YAQUELIN BOULANDIER	at (786) 516-4316 Area Code & Daytime Telephone Number
Name of Contact Person	Area Code & Daytime Telephone Number
Enclosed is a check for the following amount mad	de 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 to Articles of Incorporation

of

	of	
UNIVISTA ADVERTISING GROUP, INC.		
(Name of Corporation as curr	ently filed with the Florida De	pt. of State)
UNIVISTA ADVERTISING GROUP, INC.		
(Document Numb	er of Corporation (if known)	
Pursuant to the provisions of section 607.1006, Florida Statutes, its Articles of Incorporation:	his Florida Profit Corporation	adopts the following amendments
A. If amending name, enter the new name of the corporation	<u>i</u>	
N/A		The new
name must be distinguishable and contain the word "corpor "Corp.," "Inc.," or Co.," or the designation "Corp," "Inc," of word "chartered," "professional association," or the abbreviati	or "Co". A professional corpo on "P.A."	porated or the abbreviation ration name must contain the
B. Enter new principal office address, if applicable: (Principal office address <u>MUST BE A STREET ADDRESS</u>)	N/A	
		9
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)	N/A	JN -6
D. If amending the registered agent and/or registered office a	ddress in Florida, enter the na	
new registered agent and/or the new registered office add N/A Name of New Registered Agent	res <u>ş:</u>	
new registered agent and/or the new registered office add NA Name of New Registered Agent		
new registered agent and/or the new registered office add NA Name of New Registered Agent	ress: a street address)	

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 Do	o <u>c</u>	
X Remove	<u>V</u>	Mike Jo	<u>nes</u>	
X Add	<u>sv</u>	Sally Sn	n <u>ith</u>	
Type of Action (Check One)	Title		Name	Address
1) Change	DVST	_	YAQUELIN BOULANDIER	5701 COLLINS AVENUE
X Add				APT 717
Remove				MIAMI BEACH FL 33140
2) Change		_		
Add				
Remove				
3) Change		_		
Add				
Remove				
4) Change		_		
Add				
Remove				-
5) Change		_		· · · · · · · · · · · · · · · · · · ·
Add				
Remove				
6) Change		_		
Add				
Remove				

E. If amending or adding additional Arti (Attach additional sheets, if necessary).	icles, enter change(s) here: (Be specific)
N/A	
F. If an amendment provides for an eych	ange, reclassification, or cancellation of issued shares,
provisions for implementing the amer	ndment if not contained in the amendment itself:
(if not applicable, indicate N/A) N/A	
IV/A	
· · · · · · · · · · · · · · · · · · ·	

The date of each amendment(date this document was signed.	s) adoption:	, if other than the
-	N/A	
enective date <u>ir appricable</u> .	(no more than 90 days after amendment file date)	
	his block does not meet the applicable statutory filing requirements, this does be Department of State's records.	ate will not be listed as the
Adoption of Amendment(s)	(<u>CHECK ONE</u>)	
The amendment(s) was/were by the shareholders was/we	e adopted by the shareholders. The number of votes east for the amendment(re sufficient for approval.	s)
	e approved by the shareholders through voting groups. The following statemed for each voting group entitled to vote separately on the amendment(s):	ent
	cast for the amendment(s) was/were sufficient for approval	
by	(voting group)	
	(voting group)	
☐ The amendment(s) was/were action was not required.	e adopted by the board of directors without shareholder action and sharehold	er
☐ The amendment(s) was/were action was not required.	adopted by the incorporators without shareholder action and shareholder	
05/31/ Dated Signature	2019 Yruh	
(By sel	y a director, president or other officer – if directors or officers have not been ected, by an incorporator – if in the hands of a receiver, trustee, or other compointed fiduciary by that fiduciary)	
	ERNESTO C SARABIA	
	(Typed or printed name of person signing)	
	PRESIDENT	
	(Title of person signing)	