P18000000 855

(Req	uestor's Name)	····
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Amend

JAN 10 TOTO ALBRITTON

COVER LETTER

): Amendment Secti Division of Corpe				
AME OF CORPOR	MAZS UNLIME	EDINC.		
OCUMENT NUMB	P1800000855 BER:			
The enclosed Articles	of Amendment and fee are su	bmitted for filing.		
Please return all corres	pondence concerning this ma	itter to the following:		
	SANTA M. SOQUIER			
	MAZS UNLIMITED INC.	Name of Contact Perso	n	
	1547-1551 NW 1191'H STR	Firm/ Company (EET		
	Address NORTH MIAMI, FLORIDA 33167			
		City/ State and Zip Cod	ů.	
SAN	TASOQUIER2174@GMAIL	COM		
	E-mail address: (to be u	sed for future annual report	notification)	
For further information	r concerning this matter, plea	se call:		
SANTA M. SOQUIER		786	356-0886)	
Name (of Contact Person	Area Co	ode & Daytime Telephone Number	
Enclosed is a check for	r the following amount made	payable to the Florida Dep	artment of State:	
S35 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		Amend Division The C 2415	Address Idment Section on of Corporations Tentre of Tallahassee N. Monroe Street, Stiffe 810 assee, F1, 32303	

Articles of Amendment to Articles of Incorporation of

(<u>Name o</u> P1800000855	f Corporation as currently	filed with the Florida Dept, of State)
	(Document Number of	Corporation (if known)
		·
Pursuant to the provisions of section 607, ts Articles of Incorporation:	1006, Florida Statutes, this I	Florida Profit Corporation adopts the following amendment
A. If amending name, enter the new na	ime of the corporation:	皇 八
N/A		En new
	orp," "Inc." or "Co". A	ompany." or "incorporated" or the abbreviation Corp., \ professional corporation name must contain the word \ 2
3. Enter new principal office address, i Principal office address MUST BE A ST		<u>دن</u>
i incipal office address <u>prost pr. 3.31</u>	(KI.I. J. 3077/153 <u>0</u>)	
		7 - Table 1
·	and below	DE NO SIMA SOUTH A COLUMN
Enter new mailing address, if appli (Mailing address MAY BE A POST 6		8530 NW 30TH COURT
		MIAMI, ELORIDA 33147
). If amending the registered agent an		
new registered agent and/or the new registered office addres SANTA M. SOQUIER Name of New Registered Agent		
Name of New Registered Agent		
Name of New Registered Agent	8530 NW 30TH COURT	
Name of New Registered Agent	(Florida stre	
Name of New Registered Agent New Registered Office Address:		et address) 33147 , Florida

amending the Officers and/or Directors, enter the title and name of each officer/director being removed and title, name, and dress of each Officer and/or Director being added:

trach additional sheets, if necessary)

ease note the officer-director title by the first letter of the office title:

= President; V= Vice President; T= Treasurer; S= Secretary; D= Director; TR= Trustee; C = Chairman or Clerk; CEO = Chief vecutive Officer; CFO = Chief Financial Officer. If an officer/director holds more than one title, list the first letter of each office held, resident, Treasurer, Director would be PTD.

Thanges 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 PTJohn Doe X Remove Mike Jones <u>X</u> Add \underline{SV} Sally Smith Type of Action Address Title <u>Name</u> (Check One) $P\Gamma$ MARIA A. ZORRILLA 615 E. 29TH STREET 1) ____ Change HIALEAH, FL 33013 X Add ____ Remove \mathbf{PT} SANTA M. SOQUIER 8530 NW 30TH COURT 2) ____ Change MIAMI, FL 33147 ____ Add ___ Remove 3.) ____ Change ____ Add ____ Remove 4) ____ Change ____ Add ____ Remove 5) Change ____ Add ___ Remove 6) ____ Change ____ Add ___ Remove Page 2 of 4

E. j	<u>lf amending or adding additional Arti</u>		
(Attach additional sheets, if necessary).	(Be specific)	

		 			
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provisions for implementing the an					
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rovisions for implementing the an (if not applicable, indicate N/A)	rendment if not	contained in the	amendment itse	<u>-1f:</u>	
rovisions for implementing the an (if not applicable, indicate N/A)	nendment if not	contained in the	amendment itse	<u>-lf:</u>	
rovisions for implementing the an (if not applicable, indicate N/A)	nendment if not	contained in the	amendment itse	·If:	
provisions for implementing the an (if not applicable, indicate N/A)	nendment if not	contained in the	amendment itse	·If:	
	nendment if not	contained in the	amendment itse	·If:	

(no more than 90 days after amendment file date)

te: If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as the nument's effective date on the Department of State's records.

loption of Amendment(s) (<u>CHECK ONE</u>)

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.

I 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):

"The number of votes east for the amenda	nent(s) was/were sufficient for approval
bv	;
(voting	groupi
■ The amendment(s) was/were adopted by the boa action was not required.	ard of directors without shareholder action and shareholder
The amendment(s) was/were adopted by the incaction was not required.	corporators without shareholder action and shareholder

Dated 12 03 2019
Signature

(By a director, president or 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)

SANTA M. SOQUIER

(Typed or printed name of person signing)

PRESIDENT

(Title of person signing)