P1800004526

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(Cit	y/State/Zip/Phone #	<u> </u>
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(Do	cument Number)	
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C. GOLDEN 00T 2 6 2018

COVER LETTER

TO: Amendment Section Division of Corporations

.

NAME OF CORPORA	ATION: ARUFALCA COR	RP.	
DOCUMENT NUMBI	ER:		
	f Amendment and fee are sul	bmitted for filing.	
Please return all corresp	ondence concerning this mat	ter to the following:	
	MERCEDES VALLES		
_		Name of Contact Person	1
,	ARUFALCA CORP.		
_		Firm/ Company	
1	2701 S. JOHN YOUNG PK		
_	 	Address	
(ORLANDO, FLORIDA, 328		
-		City/ State and Zip Code	2
	_		
paola.c	ardenas@taxcareinc.com		
	E-mail address: (to be us	ed for future annual report	notification)
For further information	concerning this matter, pleas	e call:	
PAOLA CARDENAS		at (407	de & Daytime Telephone Number
Name o	Contact Person	Area Co	de & Daytime Telephone Number
Enclosed is a check for	the following amount made p	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)
Amer Divis P.O.	ing Address adment Section ion of Corporations Box 6327 hassee, FL 32314	Amend Divisio Clifton	Address Iment Section on of Corporations Building executive Center Circle

Tallahassee, FL 32301

Articles of Amendment to Articles of Incorporation of

FILED

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ARUFALCA CORP.	SPORE IARY OF ST
(Name of Corporation as	s currently filed with the Florida Dept. of State) TALL AHASSEE, F
P18000004526	
(Document	Number of Corporation (if known)
Pursuant to the provisions of section 607.1006, Florida States Articles of Incorporation:	ntutes, this Florida Profit Corporation adopts the following amendment(s) to
. If amending name, enter the new name of the corpor	ration:
ame must be distinguishable and contain the word "c Corp.," "Inc.," or Co.," or the designation "Corp," "tood "chartered," "professional association," or the abb	The new corporation," "company," or "incorporated" or the abbreviation Inc," or "Co". A professional corporation name must contain the reviation "P.A."
3. Enter new principal office address, if applicable: Principal office address <u>MUST BE A STREET ADDRES</u>	<u>ss</u>)
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)	
D. If amending the registered agent and/or registered of new registered agent and/or the new registered office	
Name of New Registered Agent	
	(Florida street address)
New Registered Office Address:	, Florida
New Registered Agent's Signature, if changing Register hereby accept the appointment as registered agent. I am	(City) (Zip Code) red Agent: n familiar with and accept the obligations of the position.
Signatur	re 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>	<u>Name</u>	Address
1) X Change	P	MERCEDES VALLES	3960 OAKS CLUBHOUSE DR.
Add			POMPANO BEACH, FL 33069
Remove			
2) Change	P	RAFAEL GONZALEZ	3960 OAKS CLUBHOUSE DR.
Add			POMPANO BEACH, FL 33069
X Remove			
3) Change			
Add			
Remove			
4) Change			
Add			
Remove			
5) Change			 .
Add			
Remove			
6) Change			
Add			
_ Remove			

amending or adding additional Arti attach additional sheets, if necessary).	(Be specific)			
<u> </u>				
			<u> </u>	
				
				
		_ 		
f an amendment provides for an excl provisions for implementing the ame	lange, reclassification	n, or cancellation	of issued shares,	
(if not applicable, indicate N/A)	ngment is not contain	ile iii iii amena		
				
_				
		,		
				
				

The date of each amendment(s) ac	option:	, if other than the
date this document was signed.		
Effective date <u>if applicable</u> :	2-2018	
Effective date in applicable.	(no more than 90 days after amendment file date)	
Note: If the date inserted in this b document's effective date on the De	lock does not meet the applicable statutory filing requirements, partment of State's records.	this date will not be listed as the
Adoption of Amendment(s)	(CHECK ONE)	
The amendment(s) was/were ado by the shareholders was/were su	pted by the shareholders. The number of votes east for the amene flicient for approval.	liment(s)
	roved by the shareholders through voting groups. The following each voting group entitled to vote separately on the amendment(
"The number of votes cast	for the amendment(s) was/were sufficient for approval	
bv	··	
•	(voting group)	
The amendment(s) was/were add action was not required.	pted by the board of directors without shareholder action and sha	reholder
☐ The amendment(s) was/were add action was not required.	pted by the incorporators without shareholder action and shareho	lder
10-02-2018 Dated	Terredas	
(By a d selecte	rector, president or other officer – if directors or officers have not d, by an incorporator – if in the hands of a receiver, trustee, or other diductory by that fiductory)	
	Mercedes Valles	
	(Typed or printed name of person signing)	
	President	
	(Title of person signing)	