P18000005632

(Re	questor's Name)	
(Ad	dress)	
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(Cit	y/State/Zip/Phone	2 #N
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PICK-UP	☐ WAIT	MAIL
(Bu:	siness Entity Nan	ne)
(Do	cument Number)	
Certified Copies	Certificates	of Status
Special Instructions to f	Filing Officer:	
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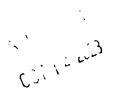
Office Use Only



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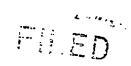
COVER LETTER

TO: Amendment Section Division of Corporations

NAME OF CO	DRPORATION: DE LA ESPRIEL	LA LAWYERS ENTERPRI	SE, INC.
	NUMBER: P18000005632		
	rticles of Amendment and fee are s	ubmitted for filing.	
Please return all	l correspondence concerning this m	atter to the following:	
	DANIEL DIAZ DE LA RO	CHA	
		Name of Contact Persor	1
	DANIEL DIAZ DE LA RO	СНА, РА	
	-	Firm/ Company	
	290 NW 165 ST, M100		
		Address	
	MIAMI, FL 33169		
	•	City/ State and Zip Code	2
	DANDELAROCHA@AOL	COM	
	-	ised for future annual report	notification)
	rmation concerning this matter, plead		949-9155 de & Daytime Telephone Number
	Name of Contact Person	Area Co	de & Daytime Telephone Number
Enclosed is a ch	neck for the following amount made	payable to the Florida Depa	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		Street Address Amendment Section Division of Corporations The Centre of Tallahassee 2415 N. Monroe Street, Suite 810	

Tallahassee, FL 32303

Articles of Amendment to Articles of Incorporation of



DE LA ESPRIELLA LAWYERS ENTERPRISE, INC.

DE LA ESPRIELLA LAWYERS ENTERPRISE. IN	C. 2023 CED 00
(Name of Corporat	ion as currently filed with the Florida Dept. of State? 9 AFI 7: 30
P18000005632	SEORY DE LA CALL
(Досин	ment Number of Corporation (if known)
Pursuant to the provisions of section 607.1006, Florid its Articles of Incorporation:	la Statutes, this Florida Profit Corporation adopts the following amendment(s)
A. If amending name, enter the new name of the c	orporation:
<u> </u>	The new
	corporation," "company," or "incorporated" or the abbreviation "Corp.," " or "Co". A professional corporation name must contain the word eviation "P.A."
B. Enter new principal office address, if applicable (Principal office address MUST BE A STREET ADDRESS)	e: DRESS)
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BO	<u>DX</u>)
D. If amending the registered agent and/or registe new registered agent and/or the new registered	red office address in Florida, enter the name of the office address:
Name of New Registered Agent	
	(Florida street address)
New Registered Office Address:	. Florida
	(City) (Zip Code)
New Registered Agent's Signature, if changing Re	pistered Agent:
	I am familiar with and accept the obligations of the position.
Sign	nature of New Registered Agent, if changing

Check if applicable

☐ The amendment(s) is/are being filed pursuant to s. 607.0120 (11) (e), F.S.

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 = ChiefExecutive Officer; CFO = Chief Financial Officer. If an officer/director holds more than one title, list the first letter of each office held.

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.

Mike Jones, V as Remove,	ana sun	ly Unitin, S	. •••	
Example: X Change	<u>PT</u>	John Doe	2	
X Remove	<u>V</u>	Mike Jor	nes	
X Add	<u>sv</u>	Sally Sm	nith_	
Type of Action (Check One)	<u>Title</u>		Name	<u>Addres</u> s
1) Change				
Add				
Remove				
2) Change				
Add				
Remove				
3) Change				
Remove				
4) Change				
Add				
Remove				
5) Change	_			
Add				
Add Remove				
_				
6) Change				
Add				
Remove				

E. If amending or adding additional Articles, enter change(s) here: (Attach additional sheets, if necessary). (Be specific) ARTICLE IV - NUMBER OF SHARES AUTHORIZED
THE NUMBER OF SHARES THE CORPORATION IS AUTHORIZED TO ISSUE IS 5,000 (FIVE-THOUSAND)
F. 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)

) adoption:	, if other than the
date this document was signed.		
Effective date <u>if applicable</u> :		
	(no more than 90 days after amendment file date)	
Note: If the date inserted in the document's effective date on the	s block does not meet the applicable statutory filing requirements, Department of State's records.	this date will not be listed as the
Adoption of Amendment(s)	(CHECK ONE)	
■ The amendment(s) was/were action was not required.	adopted by the incorporators, or board of directors without sharehold	ler action and shareholder
The amendment(s) was/were by the shareholders was/were	adopted by the shareholders. The number of votes cast for the amend sufficient for approval.	dment(s)
	approved by the shareholders through voting groups. The following for each voting group entitled to vote separately on the amendment(s	
"The number of votes of	ast for the amendment(s) was/were sufficient for approval	
by		
,	(voting group)	
DatedSignatureX	ST 14, 2023	
sele	a director, president or other officer – if directors or officers have no cted, by an incorporator – if in the hands of a receiver, trustee, or oth ointed fiduciary by that fiduciary)	
	ABELARDO DE LA ESPRIELLA	
	(Typed or printed name of person signing)	
	PRESIDENT	
	(Title of person signing)	· · · · · · · · · · · · · · · · · · ·