## P18000006024

(Reque	estor's Name)		
(Addre	ess)		
(Address)			
(City/S	State/Zip/Phone #)		
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(Docur	ment Number)		
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2022 JAN 18 PH 3: 09
SECRETARY OF STA

## **COVER LETTER**

**TO:** Amendment Section Division of Corporations

NAME OF CORPO	ORATION: AREPA PLEASE I	INC.	
	1BER: P18000006024		
The enclosed Article	es of Amendment and fee are su	bmitted for filing.	
Please return all corr	respondence concerning this ma	tter to the following:	
	ALFREDO MERCADO		
		Name of Contact Person	
	PRIME TAX SOLUTIONS L	LLC	
		Firm/ Company	
	50 N LAURA ST STE 2500	• -	
	<del></del> .	Address	<del></del>
	JACKSONVILLE, FL 32202		
		City/ State and Zip Code	e
	FREDO@PRIMETAXJAX.C	СОМ	
	E-mail address: (to be us	sed for future annual report	notification)
For further informati	ion concerning this matter, pleas	se call:	
ALFREDO MERCA	ADO	904 at (	729-0372
Name	e of Contact Person	at ( Area Co	) de & Daytime Telephone Number
Enclosed is a check	for the following amount made	navable to the Florida Den	artment of State
isherosed is a check	tor the following amount made	payable to the ritorida Depi	arment of State.
■ \$35 Filing Fee	☐ \$43.75 Filing Fee & Certificate of Status	☐S43.75 Filing Fee & Certified Copy (Additional copy is enclosed)	☐\$52.50 Filing Fee Certificate of Status Certified Copy (Additional Copy is enclosed)
Ar Di P.0	ailing Address mendment Section vision of Corporations O. Box 6327 dlahassee, FL 32314	Amend Divisio The Co 2415 N	Address Iment Section on of Corporations entre of Tallahassee N. Monroe Street, Suite 810 assee, FL 32303

## Articles of Amendment to Articles of Incorporation of



AREPA PLEASE INC.

2022 JAN 18 PM 3: 09

enter the new name of the corporation:  The new able and contain the word "corporation," "company," or "incorporated" or the abbreviation "Corp.," designation "Corp.," "Inc.," or "Co". A professional corporation name must contain the word all association, "or the abbreviation "P.A."  office address, if applicable:  MUST BE A STREET ADDRESS )  address, if applicable:  IY BE A POST OFFICE BOX)  istered agent and/or registered office address in Florida, enter the name of the tand/or the new registered office address:  egistered Agent  (Florida street address)	(Document Number of Corporation (if known)  arsuant to the provisions of section 607.1006, Florida Statutes, this Florida Profit Corporation adopts the following amendment (is Articles of Incorporation:  If amending name, enter the new name of the corporation:  The new time must be distinguishable and contain the word "corporation," "company," or "incorporated" or the abbreviation "Corp.," Inc.," or "Co". A professional corporation name must contain the word schartered," "professional association," or the abbreviation "P.A."  Enter new principal office address, if applicable:  Principal office address MUST BE A STREET ADDRESS (Mailing address, if applicable:  (Mailing address MAY BE A POST OFFICE BOX)  If amending the registered agent and/or registered office address in Florida, enter the name of the new registered agent and/or the new registered office address:  Name of New Registered Agent	( <u>Name of Corporati</u>	ion as currently filed with the Florida Dept of State)
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	New Registered Office Address:, Florida,	Name of New Registered Agent	<del></del>
Office Address: Florida			(Florida street address)
		New Registered Office Address:	Florida
		Name of New Registered Agent	(Florida street address) , Florida
	ew Registered Agent's Signature, if changing Registered Agent:	hereby accept the appointment as registered agent.	I am familiar with and accept the obligations of the position.
	ew Registered Agent's Signature, if changing Registered Agent: hereby accept the appointment as registered 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)

Example:

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.

X Change	PT	John Doe	
X Remove	<u>V</u>	Mike Jones	
X Add	<u>\$V</u>	Sally Smith	
Type of Action (Check One)	Title	<u>Name</u>	Address
1) X Change	VP	NOGUERA, CARLOS O	9164 PROSPERITY LAKE DRIVE
Add			JACKSONVILLE, FL 32244
Remove			<del></del>
2) X Change	S/T	MARIN, JOSE G	474 RIVERSIDE AVE
Add			JACKSONVILLE, FL 32202
Remove 3) X Change	P	MARIN, JOSE	474 RIVERSIDE AVE
Add			JACKSONVILLE, FL 32202
Remove			
4) Change			
Add			
Remove			
5) Change		_	
Add			
Remove			
6) Change		_	
Add			
Remove			

Attach additional sheets, if necessary).	(Be specific)	
	(De speegle)	
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f an amendment provides for an exch	ange, reclassification, or cancell	ation of issued shares,
provisions for implementing the ame	nange, reclassification, or cancell ndment if not contained in the a	ation of issued shares, mendment itself:
f an amendment provides for an exch provisions for implementing the ame (if not applicable, indicate N/A)	nange, reclassification, or cancell ndment if not contained in the a	ation of issued shares, mendment itself:
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The date of each amendment(s	adoption:	, if other than the
date this document was signed.		
Effective date if applicable:		
	(no more than 90 days after amendment file date	<u>e)</u>
Note: If the date inserted in thi document's effective date on the	s block does not meet the applicable statutory filing requirement. Department of State's records.	nts, 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 sharel	holder action and shareholder
☐ The amendment(s) was/were by the shareholders was/were	adopted by the shareholders. The number of votes cast for the ar sufficient for approval.	nendment(s)
	approved by the shareholders through voting groups. The follow for each voting group entitled to vote separately on the amendme	
"The number of votes of	ast for the amendment(s) was/were sufficient for approval	
by	.,,	
	(voting group)	
DatedSignature(By:	a director, president or other officer – if directors or officers have	
	eted, by an incorporator – if in the hands of a receiver, trustee, or sinted fiduciary by that fiduciary)	other court
	JOSE MARIN	
	(Typed or printed name of person signing)	
	PRESIDENT	
	(Title of person signing)	

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