P18000007320

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SECNCIARY OF STATE
TAIL AHASSEE, FLORIDA

JUL 2 0 2018 S. YOUNG

COVER LETTER

TO: Amendment Section Division of Corporations

NAME OF CORPORATION: SERVIRAF COR	P			
DOCUMENT NUMBER: P18000007320				
The enclosed Articles of Amendment and fee are su	bmitted for filing.			
Please return all correspondence concerning this man	tter to the following:			
	LORENA CUMARE			
	Name of Contact Perso	n		
L&	L ACCOUNTING SERV	ICES CORP		
	Firm/ Company			
	5987 NW 102ND AVE			
	Address			
	DORAL, FL 33178			
	City/ State and Zip Coc	le		
lorena	a@landlaccountingservi	ces.com		
	sed for future annual report			
	·			
For further information concerning this matter, pleas	se call:			
LORENA CUMARE	786	499-9751		
Name of Contact Person	Area Co	ode & Daytime Telephone Number		
Enclosed is a check for the following amount made p	payable to the Florida Dep	artment of State:		
■ \$35 Filing Fee	☐S43.75 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	Amen	Address dment Section on of Corporations		
P.O. Box 6327 Tallahassee, FL 32314	Cliftor	n Building Executive Center Circle		

Tallahassee, FL 32301

Articles of Amendment to Articles of Incorporation of

SERVIRAF CORP

(Name of	f Corporation as currently filed with the Florida Dept. of	State)	
	P18000007320		
	(Document Number of Corporation (if known)	· ·	
Pursuant to the provisions of section 607.1 its Articles of Incorporation:	006, Florida Statutes, this Florida Profit Corporation adopt	s the following amendmen	
A. If amending name, enter the new name	me of the corporation:		
	ain the word "corporation," "company," or "incorporate tition "Corp," "Inc," or "Co". A professional corporation ion," or the abbreviation "P.A."		
B. Enter new principal office address, i (Principal office address MUST BE A ST		<u>-</u>	
	Hor registered office address in Florida, enter the name o	JALLAHA	
new registered agent and/or the new Name of New Registered Agent	<u>registered office address:</u> JUAN C MEDINA	SSEE SSEE SSEE SSEE	
	9360 FOUNTAINEBLUE BLVD# D601 MIAMI	TEST A	
New Registered Office Address:	(Florida street address) MIAMI , Flo	33172 SP	
	(City)	(Zip Code)	
New Registered Agent's Signature, if charter of the appointment of registry	anging Registered Agent: red agent. I am familiar with and accept the obligations of Signature of New Registered Agent, if changing	the position.	

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.

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)	Title	Name	<u>Addres</u> s
1) Change	P	JOSE F MEDINA	6292 NW 186TH ST 104
Add			HIALEAH, FL 33015
X Remove			
2) Change	P	JUAN C MEDINA	9360 FOUNTAINEBLUE BLVD#
X Add			MIAMI, FL 33172
Remove			
3) Change		-	
Add			
Remove			
4) Change			
Add			
Remove			
5) Change	_		
Add			
Remove			
6) Change			
Add			
Remove			

	g or adding additional A itional sheets, if necessar					
				-		
						
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If an amen	dment provides for an e s for implementing the a	xchange, reclassif	ication, or cance	llation of issued	shares,	
(if not	applicable, indicate N/A)	ontained in the	amenoment usei	<u>1.</u>	
						
						
	-					•••

	JULY 01 2018	
ae date of each amendment(date this document was signed.	s) adoption:	, if other than the
	JULY 01 2018	
Effective date <u>if applicable</u> :	(no more than 90 days after amendment file date	·)
	nis block does not meet the applicable statutory filing requirement be Department of State's records.	its, this date will not be listed as the
Adoption of Amendment(s)	(CHECK ONE)	
☐ The amendment(s) was/were by the shareholders was/wer	adopted by the shareholders. The number of votes cast for the ame sufficient for approval.	endment(s)
	approved by the shareholders through voting groups. The following for each voting group entitled to vote separately on the amendme	
"The number of votes	cast for the amendment(s) was/were sufficient for approval	
by	(voting group)	
	(voting group)	
The amendment(s) was/were action was not required.	adopted by the board of directors without shareholder action and s	shareholder
☐ The amendment(s) was/were action was not required.	adopted by the incorporators without shareholder action and share	holder
07/01/ Dated	2018	
Signature 🗡		
(Bý sel	a director, president or other officer – if directors or officers have ected, by an incorporator – if in the hands of a receiver, trustee, or pointed fiduciary by that fiduciary)	
	JOSE F MEDINA	
	(Typed or printed name of person signing)	-
	PRESIDENT	
	(Title of person signing)	