## 1715 ( CCC 05-153

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(Address)			
(City/State/Zip/Phone #)			
(Business Entity Name)	09/01/2001003001 **35.00		
(Document Number)			
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	2020 AUG 3		

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## **COVER LETTER**

**TO:** Amendment Section Division of Corporations

NAME OF CORPORATION:	S AND PROPERTIES AAA INC	
DOCUMENT NUMBER: P18000008483		
The enclosed Articles of Amendment and fee are	submitted for filing.	
Please return all correspondence concerning this	matter to the following:	
FRANCY ARIAS		
	Name of Contact Person	
	Firm/ Company	
217 OWENSHIRE CIRC	LE	
Address		
KISSIMMEE FLORIDA	34744	
	City/ State and Zip Code	
ARIASFRANCY89@YA	HOO.COM	
E-mail address: (to b	e used for future annual report notification)	
For further information concerning this matter, p	olease call:	
Francy Arius	at (407) 618-0957 Area Code & Daytime Telephone Number	
Name of Contact Person	Area Code & Daytime Telephone Number	
Enclosed is a check for the following amount ma	ade payable to the Florida Department of State:	
Signature Signa	<del>-</del>	
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

(Name o	f Corporation as curren	tly filed with the Florida Dept. of State)	
P18000008483			
	(Document Number	of Corporation (if known)	
Pursuant to the provisions of section 607. its Articles of Incorporation:	1006, Florida Statutes. thi	s Florida Profit Corporation adopts the follo	wing amendment(s) to
A. If amending name, enter the new na	ime of the corporation:		
N/A			The new
name must be distinguishable and contain "Inc.," or Co" or the designation "C "chartered," "professional association,"	lorp," "Inc," or "Co".	"company," or "incorporated" or the abbrev A professional corporation name must co "	iation "Corp.," ntain the word
B. Enter new principal office address, if applicable: (Principal office address MUST BE A STREET ADDRESS)		217 OWENSHIRE CIRCLE	
		KISSIMMEE FLORIDA 34744	2028 AUG
			Es .
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)		217 OWENSHIRE CIRCLE	- <del></del>
		KISSIMMEE FLORIDA 34744	?
			<del></del>
D. If amending the registered agent an new registered agent and/or the new			
	FRANCY ARIAS	<u>53.</u>	
Name of New Registered Agent	217 OWENSHIRE CIRC	7 F	
		street address)	
	KISSIMMEE	3.17	14
New Registered Office Address:		(City), Florida	Zip Code)
New Registered Agent's Signature, if c I hereby accept the appointment as regist		nt: r with and accept the obligations of the posit	ion.
	fair.	Registered Agent, if changing	
	Signature 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 = 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>	<u>Addres</u> s
1) X Change	P	JORGE H GOMEZ PALACIO	217 OWENSHIRE CIRCLE
Add			KISSIMMEE FLORIDA 34744
Remove			
2) X Change	VP	MARIA D QUINTERO BETANCUI	217 OWENSHIRE CIRCLE
Add			KISSIMMEE FLORIDA 34744
Remove 3 ) Change			
Add			
Remove			
4) Change	<del></del>		
Add			
Remove			
5) Change			
Add			
Remove			
6) Change			
Add			
Remove			

If amending or addin (Attach additional shee	g additional Articles, e ets, if necessary). (Be	nter change(s) specific)	<u>here</u> :		
) A		<del>-</del>	<del>_</del>	<del></del>	
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		<del></del>		<u>-</u>	
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<del></del>	<del></del>	· <del></del>			
			<u></u>		<del>_</del>
If an amendment pro	ovides for an exchange ementing the amendme	, reclassificatio	n, or cancellation	of issued shares,	
(if not applicable	indicate N/A)	nt ii not Contai	ned in the ameno	mene usen.	
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NIA				· · · · · · · · · · · · · · · · · · ·	
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The date of each amendment(s) ad	option:	, if other than
date this document was signed.		
Effective date <u>if applicable</u> :		
	(no more than 90 days after amendment file date)	
<b>Note:</b> If the date inserted in this bl document's effective date on the De	ock does not meet the applicable statutory filing requirements, partment of State's records.	this date will not be listed as
Adoption of Amendment(s)	( <u>CHECK ONE</u> )	
★ The amendment(s) was/were ado action was not required.	pted by the incorporators, or board of directors without sharehold	ler action and shareholder
☐ The amendment(s) was/were ado by the shareholders was/were su	pted by the shareholders. The number of votes cast for the amen flicient for approval.	dment(s)
☐ The amendment(s) was/were app must be separately provided for	roved by the shareholders through voting groups. The following each voting group entitled to vote separately on the amendment(s	statement s):
"The number of votes cast	for the amendment(s) was/were sufficient for approval	
by		
, <u>-</u>	(voting group)	
Dated	14/2020	
a:	wik (Alm P	
Signature//[ (Bya di	region, president or other officer – if directors or officers have no	ot been
sefected	I, by an incorporator – if in the hands of a receiver, trustee, or other	ier court
appøint	ed fiduciary by that fiduciary)	
	Jorge H. Comez Palacio (Typed or printed name of person signing)	
	(Typed or printed name of person signing)	
	President	
	(Title of person signing)	

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