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COVER LETTER

	<i>i.</i> 60.		2.00	
NAME OF CORPORA	ATION: 6 F V/C	GE COEV	2 <i>f f</i>	
DOCUMENT NUMBI	er: <i>P 1 8 0 0</i>	00/016		
The enclosed Articles o	f Amendment and fee are su	bmitted for filing.		
Please return all corresp	ondence concerning this mat	tter to the following:		
- -	TORO		PA	
		Addless		_
_	TAVARA	ES FLO. City/ State and Zip Code	110A 3277	S
	E-mail address: (to be us	E CRUZ ed for future annual report	772-C 6-1918	11L, C 3/1
For further information	concerning this matter, pleas	e call:		
TOR 6-	E CRUZ Contact Person	at (772	de & Daytime Telephone Number	_9
Enclosed is a check for	the following amount made p	payable to the Florida Depa	rtment of State:	
\$35 Filing Fee	□S43.75 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)	
35 91		Ct. 4	. 11	

Mailing Address

TO: Amendment Section

Division of Corporations

Amendment Section
Division of Corporations
P.O. Box 6327
Tallahassee, FL 32314

Street Address

Amendment Section
Division of Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, FL 32301

Articles of Amendment

Art	tic	les	0f	1 n	co	rp	or	at	io.	ľ

ıf

s Articles of Incorporation:	3	ation adopts the following amendn	nent(s) to
. If amending name, enter the new name of the corporat	tion:		
		The we	
ame must be distinguishable and contain the word "cor Corp.," "Inc.," or Co" or the designation "Corp," "Inc ord "chartered," "professional association," or the abbrev	;," or "Co". A professional o	incorporated" or the abbreviation in the incorporation name must contain the	n ne
Enter new principal office address, if applicable:			
Principal office address <u>MUST BE A STREET ADDRESS</u>)	. ≥	
		₽ FB	77
	•	- 9 - 9	[
Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)			3
<u></u>		0 N	
. If amending the registered agent and/or registered offi new registered agent and/or the new registered office a	ce address in Florida, enter t address:	he name of the	
Name of New Registered Agent \ \mathcal{TOA}	GE CRV		
Name of New Registered Agent 16 1 6 T 16 (Fig. 17)	EXAS COUR orida street address)	TTAVARES F	LOK/ 277
New Registered Office Address:	(City)	, Florida	
	(City)	(Zip Code)	

Signature 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	PT	John Doe			
X Remove	<u>V</u>	Mike Jones			
X Add	<u>sv</u>	Sally Smith			
Type of Action (Check One)	Title	Name		Address 1616 TEXAS C	T
1) K Change	RH	S JORNE	CRV2	TAVARES, FL 3	127
Add					
Remove					
2) Change					
Add					
Remove					
3) Change					
Add					
Remove					
4) Change					
Add					
Remove					
5) Change	 	<u> </u>	<u>. </u>		
Add					
Remove					
6) Change			118-118-118-		
Add					
Remove					

Attach additional sheets, if necessary).	(Be specific)
`	
f an amendment provides for an exch	ange, reclassification, or cancellation of issued shares,
(if not applicable indicate N/A)	ndment if not contained in the amendment itself:
1 1 2	
V///	
1	· · · · · · · · · · · · · · · · · · ·
, , , , , , , , , , , , , , , , , , ,	

The date of each amendment(s) adoption: date this document was signed.	2-1-18	, if other than the
Effective date if applicable:	(no more than 90 days after amendment file date)	
	(no more than 90 days after amendment file date)	
Note: If the date inserted in this block does no document's effective date on the Department of S	t meet the applicable statutory filing requirements, state's records.	this date will not be listed as the
Adoption of Amendment(s) (CHE	ECK ONE)	
☐ The amendment(s) was/were adopted by the sl by the shareholders was/were sufficient for ap	hareholders. The number of votes cast for the amend proval.	iment(s)
	shareholders through voting groups. The following stroup entitled to vote separately on the amendment(s	
"The number of votes cast for the amend	iment(s) was/were sufficient for approval	
by	ng group)	
(votir	ng group)	
☐ The amendment(s) was/were adopted by the beaction was not required.	oard of directors without shareholder action and shareholder	reholder
The amendment(s) was/were adopted by the ir action was not required.	ncorporators without shareholder action and sharehol	lder
Dated 2 - 7 -	-18	
Signature	in the	
(By a director, presid	lent or other officer - if directors or officers have no	t been
selected by an incor	porator – if in the hands of a receiver, trustee, or other	er court
appointed fiduciary b	by that fiduciary)	
	TORGE CRUZ 'yped or printed name of person signing)	
(T	'yped or printed name of person signing)	
	PRES.	
	(Title of person signing)	