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COVER LETTER

TO: Amendment Section Division of Corporations

NAME OF CORP	ORATION: LATINOS SOLU	TIONS SERVIC	ES INC	
DOCUMENT NUM	P18000025571			
The enclosed Article	es of Amendment and fee are su	bmitted for filin	g.	
Please return all cor	respondence concerning this ma	tter to the follow	ving:	
	GONZALO AREVALO			
		Name of Co	ntact Person	
	LATINOS SOLUTIONS SE	RVICES INC		
	1970 - 1 10 Pt - 1 10 Pt - 1	Firm/ Co	ompany	· · · · · · · · · · · · · · · · · · ·
	9764 GARDENS E DR			
		Add	ress	18 h-11 h
	PALM BEACH GARDENS,	FLORIDA 334	10	
		City/ State a	nd Zip Code	:
LA	TINOS1954SERVICES@GMA	AL.COM		✓
_	E-mail address: (to be us	sed for future an	nual report	
For further informat	tion concerning this matter, pleas	se call:		
GONZALO AREV	ALO	at (561	723-4354
Nam	ne of Contact Person			de & Daytime Telephone Number
Enclosed is a check	for the following amount made	payable to the F	lorida Depa	rtment of State:
S35 Filing Fee	□\$43.75 Filing Fee & Certificate of Status	□\$43.75 Fili Certified C (Additional enclosed)	ору	☐S52.50 Filing Fee Certificate of Status Certified Copy (Additional Copy is enclosed)
A D P.	mendment Section ivision of Corporations O. Box 6327 allahassee, FL 32314		Amend Divisio Clifton 2661 E	Address ment Section n of Corporations Building xecutive Center Circle issee, FL 32301

Articles of Amendment to Articles of Incorporation of

r	ATIMOR	COL	LITERANIC	SERVICES	INIC
L	A HNUS	SOL	JULIUNS	SERVICES	INU.

(Name	of Corporation as currently	filed with the Florida I	Dept. of State)	
P18000025571			·	
	(Document Number of	Corporation (if known)		· -
Pursuant to the provisions of section 607, its Articles of Incorporation:	.1006, Florida Statutes, this F	Norida Profit Corporatio	on adopts the following a	mendment(s) to
A. If amending name, enter the new na	ame of the corporation:			
NIA			7	he new
name must be distinguishable and con "Corp.," "Inc.," or Co.," or the design word "chartered," "professional associa	nation "Corp," "Inc," or "C	o". A professional cor		
B. Enter new principal office address,	if applicable:	NIA		28
(Principal office address <u>MUST BE A S</u>	TREET ADDRESS)			19 7
				1
			ر ا مر زن	<u> </u>
C. Enter new mailing address, if appl (Mailing address MAY BE A POST		NIA	(ූ) ල 	- <u>-</u>
			` <u>.</u>	图 8
				- 141
				
 If amending the registered agent are new registered agent and/or the new registered agent are new registered. 		ess in Florida, enter the	name of the	
Name of New Registered Agent	GONZALO AREVALO			
	9764 GARDENS E DR			
	(Florida stree	et address)		
New Registered Office Address:	PALM BEACH GARDENS	· · · · · · · · · · · · · · · · · · ·	, Florida	-
	И	City)	(Zip Con	le)
New Registered Agent's Signature, if c	hanging Registered Agent:			
I hereby accept the appointment as regist	sered agent. I am familiar w	ith and accept the obliga	tions of the position.	
	(Colleged 2)			
	Signature of New Re	gistered Agent, if changi	ing	

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)	Title	<u>Name</u>	<u>Addres</u> s
1) Change	P	GLORIA AMANDA CASTANEDA	7227 72ND WAY, WEST PALM
Add			BEACH, FLORIDA 33407
X Remove			
2) Change	VP	MONICA RODRIGUEZ	7227 72ND WAY, WEST PALM
Add			BEACH, FLORIDA 33407
X Remove			
3) X Change	P	GONZALO AREVALO	9764 GARDENS E DR, PALM
Add			BEACH GARDENS, FLORIDA
Remove			33410
4) Change			
Add			
Remove			
5) Change			
Add			78
Remove			
6) Change			
Add			
Remove			

E. If amending or adding additional Articles, enter change(s) here: (Attach additional sheets, if necessary). (Be specific)
NIA
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)
NA

The date of each amendment(s) addate this document was signed.	option:	, if other than the
Effective date if applicable:		
<u> </u>	(no more than 90 days after amendment file date)	
Note: If the date inserted in this b document's effective date on the De	lock does not meet the applicable statutory filing requirements, partment of State's records.	this date will not be listed as the
Adoption of Amendment(s)	(CHECK ONE)	
■ The amendment(s) was/were ado by the shareholders was/were su	pted by the shareholders. The number of votes cast for the amend flicient for approval.	ment(s)
	roved by the shareholders through voting groups. The following seach voting group entitled to vote separately on the amendment(s	
"The number of votes cast	for the amendment(s) was/were sufficient for approval	
by	(voting group)	
	(voting group)	
☐ The amendment(s) was/were ado action was not required.	pted by the board of directors without shareholder action and shar	eholder
The amendment(s) was/were ado action was not required.	pted by the incorporators without shareholder action and sharehol	der
JUNE 03,20 Dated	019	
	in Castana Ca	
selected	rector, president or other officer – if directors or officers have not l, by an incorporator – if in the hands of a receiver, trustee, or othe ed fiduciary by that fiduciary)	
	GLORIA AMANDA CASTANEDA	
	(Typed or printed name of person signing)	
	PRESIDENT	
	(Title of person signing)	