

PI200030562

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

(Business Entity Name)

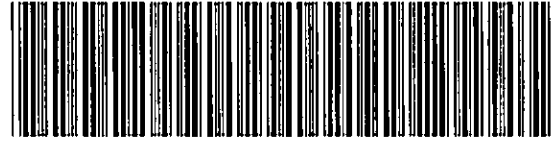
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2018 AUG - 6 PM 3:58
SECRETARY OF STATE
TALLAHASSEE, FL

C. GOLDEN
AUG - 8 2018

COVER LETTER

TO: Amendment Section
Division of Corporations

NAME OF CORPORATION: CARUAO SOLLUTIONS CORP

DOCUMENT NUMBER: P18000030562

The enclosed *Articles of Amendment* and fee are submitted for filing.

Please return all correspondence concerning this matter to the following:

KATIUSKA VARELA

Name of Contact Person

CARUAO SOLLUTIONS CORP

Firm/ Company

7220 NW 114 AVE APT 301

Address

DORAL, FLORIDA 33178

City/ State and Zip Code

CARUAOSOLUTIONS@GMAIL.COM

E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

KATIUSKA VARELA

at (786) 5561036

Name of Contact Person

Area Code & Daytime Telephone Number

Enclosed is a check for the following amount made payable to the Florida Department of State:

☒ \$35 Filing Fee

☐ \$43.75 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)

Mailing Address

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



FLORIDA DEPARTMENT OF STATE
Division of Corporations

July 9, 2018

KATIUSKA VARELA
7220 NW 114 AVENUE
APT. 301
DORAL, FL 33178

SUBJECT: CARUAO SOLLUTIONS CORP
Ref. Number: P18000030562

We have received your document and check(s) totaling \$35.00. However, the enclosed document has not been filed and is being returned to you for the following reason(s):

Please list the names of your officers/directors.

Please list the title(s) of each officer in your document.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6050.

Claretha Golden
Regulatory Specialist II

Letter Number: 618A00014093

RECEIVED
18 AUG -6 PM 2:15
SECRETARY OF STATE
TALLAHASSEE, FL

Articles of Amendment
to
Articles of Incorporation
of

FILED

2018 AUG -6 PM 3: 58

CARUAO SOLUTIONS CORP

(Name of Corporation as currently filed with the Florida Dept. of State)
P18000030562

SECRETARY OF STATE
TALLAHASSEE, FL

(Document Number of Corporation (if known))

Pursuant to the provisions of section 607.1006, Florida Statutes, this *Florida Profit Corporation* adopts the following amendment(s) to its Articles of Incorporation:

A. If amending name, enter the new name of the corporation:

CARUAO SOLUTIONS CORP

The new name must be distinguishable and contain the word "corporation," "company," or "incorporated" or the abbreviation "Corp.," "Inc.," or "Co.," or the designation "Corp.," "Inc.," or "Co." A professional corporation name must contain the word "chartered," "professional association," or the abbreviation "P.A."

B. Enter new principal office address, if applicable:

(Principal office address MUST BE A STREET ADDRESS)

4400 NW 107TH AVE

APT 308

DORAL, FLORIDA 33178

C. Enter new mailing address, if applicable:

(Mailing address MAY BE A POST OFFICE BOX)

4400 NW 107TH AVE

APT 308

DORAL, FLORIDA 33178

D. 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 KATIUSKA VARELA

4400 NW 107TH AVE APT 308

(Florida street address)

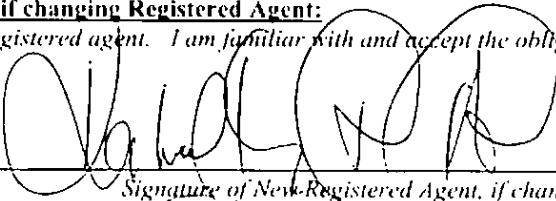
New Registered Office Address: DORAL, FLORIDA 33178

(City)

(Zip Code)

New Registered Agent's Signature, if changing Registered Agent:

I hereby accept the appointment as registered agent. I am familiar with and accept the obligations of the position.



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:

☒ Change PT John Doe

☐ Remove V Mike Jones

☒ Add SV Sally Smith

Type of Action (Check One)	Title	Name	Address
1) <input checked="" type="checkbox"/> Change	<u>P</u>	<u>KATUSKA JARELA</u>	<u>4400 NW 107TH AVE</u>
<input type="checkbox"/> Add			<u>APT 308</u>
<input type="checkbox"/> Remove			<u>DORAL, FL 33178</u>
2) <input checked="" type="checkbox"/> Change	<u>V</u>	<u>Alexander Betancourt</u>	<u>4400 NW 107TH AVE</u>
<input type="checkbox"/> Add			<u>APT 308</u>
<input type="checkbox"/> Remove			<u>DORAL, FL 33178</u>
3) <input type="checkbox"/> Change			
<input type="checkbox"/> Add			
<input type="checkbox"/> Remove			
4) <input type="checkbox"/> Change			
<input type="checkbox"/> Add			
<input type="checkbox"/> Remove			
5) <input type="checkbox"/> Change			
<input type="checkbox"/> Add			
<input type="checkbox"/> Remove			
6) <input type="checkbox"/> Change			
<input type="checkbox"/> Add			
<input type="checkbox"/> Remove			

E. If amending or adding additional Articles, enter change(s) here:

(Attach additional sheets, if necessary). (Be specific)

N/A

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)

N/A

The date of each amendment(s) adoption: N/A, if other than the date this document was signed.

Effective date if applicable: N/A
(no more than 90 days after amendment file date)

Note: If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as the document's effective date on the Department of State's records.

Adoption of Amendment(s) (CHECK ONE)

- ☒ The amendment(s) was/were adopted by the shareholders. The number of votes cast for the amendment(s) by the shareholders was/were sufficient for approval.
- ☐ The amendment(s) was/were approved by the shareholders through voting groups. *The following statement must be separately provided for each 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)

- ☐ The amendment(s) was/were adopted by the board of directors without shareholder action and shareholder action was not required.
- ☐ The amendment(s) was/were adopted by the incorporators without shareholder action and shareholder action was not required.

Dated 06/20/2018

Signature _____

(By a director, president or other officer – if directors or officers have not been selected, by an incorporator – if in the hands of a receiver, trustee, or other court appointed fiduciary by that fiduciary)

KATIUSKA VARELA

(Typed or printed name of person signing)

PRESIDENT

(Title of person signing)