# 01800031267

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(A	ddress)				
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(C	ity/State/Zip/Phone #)				
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# **COVER LETTER**

**TO:** Amendment Section Division of Corporations

NAME OF CORPO	DATION, AAA SICILIA INC	;	
DOCUMENT NUM	P18000031267		
The enclosed Articles	s of Amendment and fee are su	bmitted for filing.	
Please return all corre	espondence concerning this ma	tter to the following:	
	ALQUILE SICILIA		
		Name of Contact Persor	1
	AAA SICILIA INC		
		Firm/ Company	
	1052 NW 103 ST		
		Address	_
	MIAMI, FL 33150		
		City/ State and Zip Code	
ΔSI	CILIAAA@yahoo.com		
——————————————————————————————————————	-	16 6	
	E-mail address; (to be us	sed for future annual report	nouncation)
For further information	on concerning this matter, pleas	se call:	
ALQUILE SICILIA		786	546-8938
Name	of Contact Person	Area Co	de & Daytime Telephone Number
Enclosed is a check f	or the following amount made	payable to the Florida Depa	artment 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)
Ma	niling Address	Street	Address
	endment Section		ment Section
Div	zision of Corporations	Divisio	n of Corporations
P.C	). Box 6327	Clifton	Building
Tal	lahassee, FL 32314	2661 E	xecutive Center Circle

Tallahassee, FL 32301

## Articles of Amendment to Articles of Incorporation $\mathbf{of}$

The new ad contain the word "corporation." "company." or "incorporated" or the abbreviation designation "Corp." "Inc." or "Co". A professional corporation name must contain the ssociation," or the abbreviation "P.A."  dress, if applicable:  IF. A STREET ADDRESS   MIAMI, FL 33150  MIAMI, FL 33150  MIAMI, FL 33150  MIAMI, FL 33150  Company." or "incorporated" or the abbreviation designation name must contain the ssociation, or the abbreviation "P.A."  MIAMI, FL 33150  MIAMI, FL 33150  Company." or "incorporated" or the abbreviation name must contain the ssociation, or the abbreviation name must contain the ssociation name must contain the ssociation, or the abbreviation name must contain the ssociation name nust contain t	AAA SICILIA INC								
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d contain the word "corporation," "company," or "incorporated" or the abbreviation designation "Corp." "Inc." or "Co". A professional corporation name must contain the association," or the abbreviation "P.A."  dress, if applicable:  E. A STREET ADDRESS   1052 NW 103 ST	A. If amending name, enter the new name	of the corporation:							
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MIAMI. FL 33150  MIAMI. FL 33150  ent and/or registered office address in Florida, enter the name of the the new registered office address:  (Florida street address)  (Florida street address)  1052 NW 103 ST. MIAMI  Florida  33150	(Principal office address MUST BE A STRI		MIAMI, FL 33150		_				
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ent and/or registered office address in Florida, enter the name of the the new registered office address:  (Florida street address)  (Florida ST. MIAMI Florida 33150	C. Enter new mailing address, if applicabe (Mailing address MAY BE A POST OF)		1052 NW 103 ST	4****	_ مر عن				
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(Florida street address)  1052 NW 103 ST. MIAMI dress:  1052 NW 103 ST. MIAMI Florida	new registered agent and/or the new re		ss in Fiorida, enter the name of	tne ·	+	-			`
dress: 1052 NW 103 ST. MIAMI	Name of New Registered Agent				2	Ţi	I		
dress: 1052 NW 103 ST. MIAMI									
dress:, Florida		(Florida stree	t address)						
	New Registered Office Address:	52 NW 103 ST. MIAMI	, Flo	33150 rida					
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	New Registered Agent's Signature, if chan I hereby accept the appointment as registered		th and accept the obligations of t	he position.					
re, if changing Registered Agent: registered agent. I am familiar with and accept the obligations of the position.		-		-					
		Signature of New Res	gistered 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	<u>PT</u>	John Do	<u>e</u>	
X Remove	<u>V</u>	Mike Jo	nes	
X Add	<u>sv</u>	Sally Sn	<u>uith</u>	
Type of Action (Check One)	<u>Title</u>		Name	<u>Addres</u> s
1) Change		_		
Add				
Remove				
2) Change		_		
Add				
Remove				
3 ) Change		_		
Add				
Remove				
4) Change		_		
Add				
Remove				
5) Change		<del></del>		
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6) Change		_		
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f amending or adding additional Arti Attach additional sheets, if necessary).	(Be specific)	
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1.1917		
<u> </u>	<del>.</del>	
f an amendment provides for an exch	ange, reclassification, or cancellation of issued sha	ares,
provisions for implementing the ame (if not applicable, indicate N/A)	ndment if not contained in the amendment itself:	
(Trian approximate material variety		
<del></del> "	<del></del>	

The date of each amendment(s) adoption:	than the
Effective date if applicable:  (no more than 90 days after amendment file date)	
(no have man 70 days and amendment me date)	
<b>Note:</b> If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be liste document's effective date on the Department of State's records.	d as the
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.	
09/07/2018	
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)	
ALQUILE SICILIA HERNANDEZ	
(Typed or printed name of person signing)	
PRESIDENT	
(Title of person signing)	