P18000034361

		
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(Ad	ldress)	
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TO: Amendment Sect Division of Corp			÷	PO MANY WERE STATE OF THE STATE
NAME OF CORPO	RATION: GUZPO INC.			E .
DOCUMENT NUM	BER: P18000034361			, , ; , , , , , , , , , , , , , , , , ,
	of Amendment and fee are sub	omitted for filing.		G.
Please return all corre	spondence concerning this mat	ter to the following:		
	Norma Yolanda Guzman			
		Name of Contact Person	l	
	Guzpo Inc.			
		Firm/ Company		
	2316 SW 34th Way			
	**************************************	Address		
	Fort Lauderdale, FL 33312			
		City/ State and Zip Code	:	
	info.guzpo@gmail.com			
	E-mail address: (to be us	ed for future annual report	notification)	
For further information	on concerning this matter, pleas	se call:		
Norma Yolanda Guz	man	at (305	484-4045	
Name	of Contact Person	Area Co	de & Daytime Telephone Number	
Enclosed is a check for	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)	
An Div P.C	niling Address nendment Section vision of Corporations D. Box 6327 Ilahassee, FL 32314	Ameno Divisio The C 24151	Address Iment Section on of Corporations entre of Tallahassee N. Monroe Street, Suite 810 assee, FL 32303	

Articles of Amendment to Articles of Incorporation of

GUZPO INC.

(Name of Corporation as cu	arrently filed with the Florida Dept. of State)
P18000034361	arrently filed with the Florida Dept. of State
(Document Nur	mber of Corporation (if known)
Pursuant to the provisions of section 607.1006, Florida Statute its Articles of Incorporation:	es, this Florida Profit Corporation adopts the following amendment(s) to
A. If amending name, enter the new name of the corporati	ion:
EQUILIBRIO INSURANCE INC.	The new
name must be distinguishable and contain the word "corporati "Inc.," or Co.," or the designation "Corp," "Inc," or "C "chartered," "professional association," or the abbreviation	ion," "company," or "incorporated" or the abbreviation "Corp.," Co". A professional corporation name must contain the word "P.A."
B. Enter new principal office address, if applicable:	
(Principal office address MUST BE A STREET ADDRESS)
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)	
D. If amending the registered agent and/or registered office and/or the new registered office a	ace address in Florida, enter the name of the address:
Name of New Registered Agent	
/Fic	orida street address)
New Registered Office Address:	(City) , Florida (Zip Code)
	(City) (Exp Code)
New Registered Agent's Signature, if changing Registered I hereby accept the appointment as registered agent. I am fa	Agent:
Signature oj	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)

Example:

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.

X Change	<u>PT</u>	<u>John Doe</u>	
X Remove	<u>v</u>	Mike Jones	
X Add	<u>\$V</u>	Sally Smith	
Type of Action (Check One)	<u>Title</u>	<u>Name</u>	<u>Addres</u> s
1) X Change	PTSD	Norma Yolanda Guzman	2316 SW 34th Way
Add			Fort Lauderdale, FL 33312
Remove			
2) Change	VD	Jessica de la Fuente	9311 Orange Grove Drive Apt 212
X Add			Davie, FL 33324
Remove 3) Change			
Add			
Remove			
4) Change			
Add			
Remove			
5) Change			
Add			
Remove			
6) Change	-		
Add			
Remove			

Attach additional sheets, if necessary).	(Be specific)
•	
<u> </u>	
an amendment provides for an exc	hange, reclassification, or cancellation of issued shares,
provisions for implementing the amo	endment if not contained in the amendment itself:
(·/* ,]+]+ + - , +1/4\	
(ij not applicable, indicate N/A)	
(if not applicable, indicate N/A)	
(if not applicable, indicate N/A)	

) adoption:	, if other than the
date this document was signed.		
Effective date if applicable:		
	(no more than 90 days	after amendment file date)
Note: If the date inserted in the document's effective date on the		atutory filing requirements, this date will not be listed as the
Adoption of Amendment(s)	(CHECK ONE)	
■ The amendment(s) was/were action was not required.	adopted by the incorporators, or board of	f directors without shareholder action and shareholder
☐ The amendment(s) was/were by the shareholders was/were	adopted by the shareholders. The number sufficient for approval.	er of votes cast for the amendment(s)
	approved by the shareholders through v for each voting group entitled to vote se	
"The number of votes of	ast for the amendment(s) was/were suff	cient for approval
by		"
	(voting group)	
April 30 Dated), 2020	
Signature	ga) sus	
(By	a director, president or other officer - if	
	cted, by an incorporator – if in the hand pinted fiduciary by that fiduciary)	s of a receiver, trustee, or other court
	Norma Yolanda Guzman	
	(Typed or printed name of	f person signing)
	President	
	(Title of person signing)	