

PI 8000 38859

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

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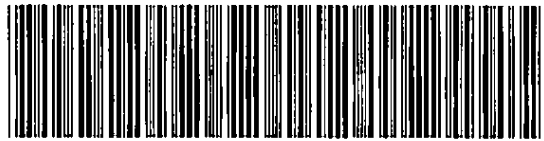
(Business Entity Name)

(Document Number)

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S TALLENT  
MAY 29 2018

FILED  
18 MAY 25 PM 3:58  
CLERK OF SUPERIOR COURT  
JANET L. HARRIS, CLERK

*Amend*

**COVER LETTER**

TO: Amendment Section  
Division of Corporations

NAME OF CORPORATION: PK RANGEL CORPORATION, INC

DOCUMENT NUMBER: P18000038859

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

Please return all correspondence concerning this matter to the following:

GLAUCIA BASTOS

Name of Contact Person

TRUST CIRCLE SERVICES, LLC

Firm/ Company

1001 EAST SAMPLE ROAD 10E

Address

POMPANO BEACH FLORIDA 33064

City/ State and Zip Code

ATENDIMENTO@THETRUSTCIRCLE.INFO

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

✓

For further information concerning this matter, please call:

GLAUCIA BASTOS at ( 954 ) 864-7884  
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:

- |   |  |   |  |
|---|--|---|--|
| <input checked="" type="checkbox"/> \$35 Filing Fee | <input type="checkbox"/> \$43.75 Filing Fee &<br>Certificate of Status | <input type="checkbox"/> \$43.75 Filing Fee &<br>Certified Copy<br>(Additional copy is<br>enclosed) | <input type="checkbox"/> \$52.50 Filing Fee<br>Certificate of Status<br>Certified Copy<br>(Additional Copy<br>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 32304

PK RANGEL CORPORATION, INC

P1800003889

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

## Page 1 of 4

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                    V      Mike Jones

X Add                        SV      Sally Smith

Type of Action (Check One)	Title	Name	Address
1) <input type="checkbox"/> Change	<u>P</u>	<u>RANGEL COSTA</u>	<u>10328 BOCA ENTRADA BLV</u>
<input type="checkbox"/> Add			<u>128</u>
<input checked="" type="checkbox"/> Remove			<u>BOCA RATON FL 33428</u>
2) <input type="checkbox"/> Change	<u>P</u>	<u>PEDRO RANGEL COSTA</u>	<u>10328 BOCA ENTRADA BLV</u>
<input checked="" type="checkbox"/> Add			<u>128</u>
<input type="checkbox"/> Remove			<u>BOCA RATON FL 33428</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)

[illegible]

**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)

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The date of each amendment(s) 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 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):*

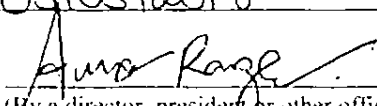
"The number of votes cast for the amendment(s) was/were sufficient for approval

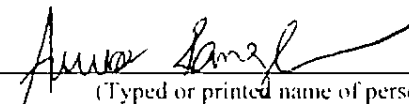
by \_\_\_\_\_."  
(voting group)

- ☒ 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 05/05/2018

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)

 - ANA DA SILVA PACHECO Penha Rangel  
(Typed or printed name of person signing)

Vice president  
(Title of person signing)