P18000039337

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SECRETARY OF STATE

C. GOLDEN MAY 1 6 2018

COVER LETTER

TO: Amendment Section Division of Corporations

NAME OF CORPORATION: ALONSO FIELD SERVICES CORP.
DOCUMENT NUMBER: P18000039337
The enclosed Articles of Amendment and fee are submitted for filing.
Please return all correspondence concerning this matter to the following:
Daniel N. 410050 Name of Contact Person A 10050 Field Services COSP. Firm/ Company 10630 Walker Vista Dr. Address Riverview FL 33578 City/ State and Zip Code danielalonso 1983@hotmail. Com E-mail address: (to be used for future annual report notification)
For further information concerning this matter, please call:
Daniel N. Alonsu at (813) 787-7843 Name of Contact Person Area Code & Davime Telephone Number
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 Certificate of Status Certified Copy (Additional copy is enclosed) \$43.75 Filing Fee Certified Copy (Additional Copy is enclosed) \$43.75 Filing Fee Certified Copy (Additional Copy is enclosed)
Mailing AddressStreet AddressAmendment SectionAmendment SectionDivision of CorporationsDivision of Corporations

P.O. Box 6327 Tallahassee, FL 32314 Clifton Building 2661 Executive Center Circle Tallahassee, FL 32301

Articles of Amendment Articles of Incorporation

Alonso Field Services Curp. (Name of Corporation as currently filed with the Florida Dept. of State)

TASECRETARY IS PA 1. SECONDATE OF THE SE

Pursuant to the provisions of section 607.1006. Florida Statutes, this Florida Profit Corporation adopts the following amendment(s) to

name must be distinguishable and contain the word "Corp.," "Inc.," or Co.," or the designation "Corp,		
word "chartered," "professional association," or the o	abbreviation "P.A."	
B. Enter new principal office address, if applicable (Principal office address <u>MUST BE A STREET ADD</u>		
C. Enter new mailing address, if applicable: (Mailing address <u>MAY BE A POST OFFICE BO</u>	<u></u>	
D. If amending the registered agent and/or register new registered agent and/or the new registered of	office address:	
Name of New Registered Agent		.
	(Florida street address)	
New Registered Office Address:		Florida
	(City)	(Zip Code)
New Registered Agent's Signature, if changing Regi I hereby accept the appointment as registered agent.		the obligations of the position.
Cons	uture 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: <u>X</u> Change	<u>PT</u> <u>Joh</u>	nn Doe				
X Remove	<u>V</u> <u>Mil</u>	Mike Jones				
X Add	<u>SV</u> <u>Sal</u>	Sally Smith				
Type of Action (Check One)	<u>Title</u>	Name	<u>Addres</u> s			
1) Change	PD	Duniel N. Alonso	10630 Walker Vistabr.			
$\underline{\mathcal{X}}_{Add}$			RIVERVIEW FL 33578			
Remove						
2) Change						
Add						
Remove						
3) Change						
Add						
Remove						
4) Change						
Add						
Remove						
5) Change						
Add						
Remove						
6) Change						
Add						
Remove						

If amending or adding additional Art Attach additional sheets, if necessary).	(Be specific)			
				
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f an amendment provides for an exc	hange, reclassification	n, or cancellation	of issued shares,	
provisions for implementing the ame (if not applicable, indicate N/A)	endment if not conta	ined in the amendi	ment itself:	
(g www.spp.nou.we, maname /m//)				
	********		 -	
				
				
			-	
	_			<u> </u>

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)	
(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 document's effective date on the Department of State's records.	not be listed 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	
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_()5/11/18	
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)	
(Typed or printed name of person signing)	
President - Director (Title of person signing)	