PIS ODOC_	46643
(Requestor's Name) (Address) (Address)	300331994123
(City/State/Zip/Phone #) PICK-UP WAIT MAIL (Business Entity Name) (Document Number) Certified Copies Certificates of Status Special Instructions to Filing Officer:	07/30/1901031018 ++70.00
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COVER LETTER

TO: Amendment Section Division of Corporations

P.

indra PA NAME OF CÖRPORATION: **DOCUMENT NUMBER:**

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

Please return all correspondence concerning this matter to the following:

Name of Contact Person Firm/ Company We. 431 State and Zip Code for future annual report notification) F-ma

For further information concerning this matter, please call:

Name of Contact Person

at(561) 303-9539

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 <u>Street Address</u> Amendment Section Division of Corporations Clifton Building 2661 Executive Center Circle

Tallahassee, FL 32301

Articles of Amendment
to
Articles of Incorporation
of
$A = \int D = D = \int D = D = D = D = D = D = D$
Tha LUKA SUMPZ (JAARA PH
(Name of Corporation as currently filed with the Florida Dept. of State)
$\leq 1000000000000000000000000000000000000$
11800046643

(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) its Articles of Incorporation:

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

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. <u>Enter new principal office address, if applicable:</u> (Principal office address <u>MUST BE A STREET ADDRESS</u>)

C. <u>Enter new mailing address, if applicable:</u> (Mailing address <u>MAY BE A POST OFFICE BOX</u>)

D. <u>If amending the registered agent and/or registered office address in Florida, enter the name of the</u> <u>new registered agent and/or the new registered office address:</u>

Name of New Registered Agent _ Carla_	Marcelo
2385 NW	Executive Dr. Suite #100.
(Liberti	la street address)
New Registered Office Address Data Ko	Hay Florida 33431
ť	(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,

shature 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, an address of each Officer and/or Director being added:

(Attach additional sheets, if necessary)

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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 = ChieExecutive Officer; CFO = Chief Financial Officer. If an officer/director holds more than one title, list the first letter of each officheld. 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 $_i$ 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.

<u>X</u> Change	<u>РТ</u>	John Doe		
<u>X</u> Remove	Y	Mike Jones		
<u>X</u> Add	<u>sv</u>	Sally Smith		
<u>Type of Action</u> (Check One)	<u>_Title</u>	Name		Address
1) Change	\mathcal{D}	- Fortune	ita Espinoza	2385 NW Executive D
X_ Add			-	Suite 100.
Remove		\frown	(Bora Raton, FL 3342
2) Change	6	_ Kayonda	Williams	1221 Brickell Ave
Add		/		Suite 900.
X Remove				Miami, F233131
3) Change	<u> </u>			
Add				
Remove				
4) Change	- <u></u>			
Add				
Remove				<u> </u>
5) Change				
Add				
Remove				
6) Change				
Add				·
Remove				

amending or adding additional Articles, enter change(s) bere : Attach additional sheets, if necessary). (Be specific)	
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	2210
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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)	10 S
	0000 4
	·······
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The date of each amendment(s) adoption:	, if other than
Effective date <u>if applicable</u> :	
(no more than 90 days after amendme	eni file date)
Note: If the date inserted in this block does not meet the applicable statutory filing document's effective date on the Department of State's records.	requirements, this date will not be listed as
Adoption of Amendment(s) (<u>CHECK ONE</u>)	
The amendment(s) was/were adopted by the shareholders. The number of votes cast by the shareholders was/were sufficient for approval.	t for the amendment(s)
□ The amendment(s) was/were approved by the shareholders through voting groups. T must be separately provided for each voting group entitled to vote separately on the	
"The number of votes cast for the amendment(s) was/were sufficient for appro-	val
by	" ·
(voting group)	
The amendment(s) was/were adopted by the board of directors without shareholder a action was not required.	action and shareholder
The amendment(s) was/were adopted by the incorporators without shareholder action action was not required.	n and shareholder
Dated UV 26, 2019 Signature	100 Bit 5
(By a director, president or president or president or off selected, by an incorport or within the hands of a receiver, appointed fiduciary by that fiduciary)	Ticers have not been trustee, or other court
ANA LUISA GOMPEZ CUAC (Typed or printed name of person signing	11/2 1g)
Tresident	

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