P18000047848

(Pe	equestor's Name)	
(Re	questors mame)	
(Ad	ldress)	
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(Cit	ty/State/Zip/Phone	e #)
PICK-UP	☐ WAIT	MAIL
(Bu	isiness Entity Nam	ne)
(Do	ocument Number)	
Certified Copies	_ Certificates	of Status
Special Instructions to	Eiling Officer:	
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SECRETARY OF SIGNATURE STATES OF COMPERATORS

1720 J. 5012

COVER LETTER

FURETARY OF SAME SEURETARY OF SAME STATISTION OF CORPORATIONS

TO: Amendment Section Division of Corporations 2010 JUL 26 AH 11: 42

NAME OF CORPO	RATION: JACOB PORTILL	O, PA	
DOCUMENT NUM	BER: P18000047848		
The enclosed Articles	of Amendment and fee are su	bmitted for filing.	
Please return all corre	spondence concerning this ma	tter to the following:	
	JACOB PORTILLLO		
		Name of Contact Person	n
	JACOB PORTILLO, PA		
	 	Firm/ Company	
	9152 CHANDLER DR		
	•	Address	
	GROVELAND, FL 34736		
		City/ State and Zip Cod	e
JAC	OBPORTILLO02@GMAIL.(СОМ	
	E-mail address; (to be us	sed for future annual report	notification)
For further informatio	n concerning this matter, pleas	se call:	
JACOB PORTILLLO)	352	444-9209
Name	of Contact Person		de & Daytime Telephone Number
Enclosed is a check fe	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)
	iling Address		Address
Amendment Section Division of Corporations			Iment Section on of Corporations
	. Box 6327		Building
Tallahassee, FL 32314		2661 Executive Center Circle	

Tallahassee, FL 32301

Articles of Amendment to Articles of Incorporation of

DECRETARY OF SHEE DEVISION OF CORPORATES

JACOB PORTILLO, PA

2010 JUL 26 AH 11: 49

(Name o	of Corporation as currently	filed with the Florida	a Dept. of State)	
P18000047848				
	(Document Number of	Corporation (if known)	
Pursuant to the provisions of section 607. its Articles of Incorporation:	1006, Florida Statutes, this F	lorida Profit Corpora	tion adopts the following amendment	(s) to
A. If amending name, enter the new na	ame of the corporation:	//^	274	
name must be distinguishable and con "Corp.," "Inc.," or Co.," or the design word "chartered," "professional associa	nation "Corp," "Inc," or "C	o". A professional c	The new ncorporated" or the abbreviation orporation name must contain the	
B. Enter new principal office address, (Principal office address MUST BE A S		_N/A		
C. Enter new mailing address, if appli (Mailing address MAY BE A POST) D. If amending the registered agent an	OFFICE BOX)	N/A ss in Florida, enter the	he name of the	
new registered agent and/or the nev	w registered office address: JACOB PORTILLO			
Name of New Registered Agent				
	9152 CHANDLER DR GF		36	
New Registered Office Address:	(Florida stre M / A	tularess)	Title-1.4-	
trew Registered Office Address.		City)	(Zip Code)	
New Registered Agent's Signature, if ell hereby accept the appointment as regist		th and accept the obli	gations of the position.	

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.

X Change	PT John Doe	
X Remove	V Mike Jones	
X Add	SV Sally Smith	
Type of Action (Check One)	<u>Title</u> <u>Name</u>	Address
I) Change	P JACOB PORTILLO	9152 CHANDLER DR
X Add		GROVELAND, FL 34736
Remove		
2) Change	N/A N/A	
Add	1	
Remove	. / / .	
3) Change		
Add	/	
Remove	. 1	
4)Change	\mathcal{N}/\mathcal{A}	
Add	1	
Remove		
5)Change	\mathcal{N}/\mathcal{A}	
	,	
Remove	,	
6) Change	N/A	
Add	1	
Remove		

ı ı amendin Attaçh <i>addi</i>	or adding additional Articles, enter change(s) here: tional sheets, if necessary). (Be specific)	
	NA	
	· · · · · · · · · · · · · · · · · · ·	
·		
<u> </u>		
provisions	iment provides for an exchange, reclassification, or cancellation of issued shares, for implementing the amendment if not contained in the amendment itself: applicable, indicate N/A)	
	N/A	

The date of each amendment(s) adoption:, if other than date this document was signed.
07/23/2018
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 a 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
07/23/2018
Signature Jawl Lowell
(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)
JACOB PORTILLO
(Typed or printed name of person signing)
P / OWNER
(Title of person signing)

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