P18000049898

(Re	questor's Name)	1
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(Cit	y/State/Zip/Phon	e #1
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PICK-UP	MAIT WAIT	MAIL
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(Bu	siness Entity Na	me)
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Certified Copies	_ Certificate	s of Status
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ECRETARY OF STATE

COVER LETTER

TO: Amendment Section Division of Corporations

NAME OF CORPORATION: Master Punch O	out Inc
DOCUMENT NUMBER: P18000049898	
The enclosed Articles of Amendment and fee are	submitted for filing.
Please return all correspondence concerning this	matter to the following:
	Jacqueline M Rosado
	Name of Contact Person
	Tax House Miami Inc
	Firm/ Company
	301 NE 79th Street #2
	Address
	Miami FL 33138
	City/ State and Zip Code
	jacqui@taxhousemiami.com
E-mail address: (to be	e used for future annual report notification)
For further information concerning this matter, p	lease call:
Jacqueline M Rosado	786 615-2009 x 109
Name of Contact Person	Area Code & Daytime Telephone Number
Enclosed is a check for the following amount ma	de payable to the Florida Department of State:
■ \$35 Filing Fee ☐ \$43.75 Filing Fee Certificate of Status	
Mailing Address Amendment Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314	Street Address Amendment Section Division of Corporations The Centre of Tallahassee 2415 N. Monroe Street, Suite 810

Taliahassee, FL 32303

Articles of Amendment to Articles of Incorporation

FILED

Master Punch Out inc

2021 JAN 25 PH 3: 25

(Name of Corporation as currently filed with the Florida Dept. of SAE) STATE

7 18000049898 TALLAHASSEE, FL 718000049898

. If amending name, enter the new name of the corpo	ration:	
		The ne
ime must be distinguishable and contain the word "corpo Inc.," or Co.," or the designation "Corp," "Inc." or chartered," "professional association," or the abbreviat	"Co". A professional corporation nam	the abbreviation "Corp., se must contain the wor
. Enter new principal office address, if applicable: Principal office address <u>MUST BE A STREET ADDRE</u>	<u>SS</u>)	
Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)		<u></u>
. If amending the registered agent and/or registered	office address in Florida, enter the name	of the
new registered agent and/or the new registered offi	ce address:	
new registered agent and/or the new registered offi	office address in Florida, enter the name se address:	
<u>Name of New Registered Agent</u>	ce address:	
Name of New Registered Agent	ce address: (Florida street address)	
<u>Name of New Registered Agent</u>	ce address: (Florida street address)	
new registered agent and/or the new registered offi Name of New Registered Agent	ce address: (Florida street address)	
new registered agent and/or the new registered offi Name of New Registered Agent New Registered Office Address:	ce address: (Florida street address)	
new registered agent and/or the new registered offi Name of New Registered Agent New Registered Office Address: ew Registered Agent's Signature, if changing Register	ce address: (Florida street address) (City) red Agent:	Florida(Zip Code)
new registered agent and/or the new registered offi Name of New Registered Agent	ce address: (Florida street address) (City) red Agent:	Florida(Zip Code)

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>sv</u>	Sally Smith	
Type of Action (Check One)	<u>Title</u>	<u>Name</u>	<u>Addres</u> s
1) Change	VP	Eduardo I. Diaz	425 E 33rd Street #33
Add _X Remove			Hialeah FL 33013
Remove 2) Change	VP	Cindy Nunez	425 E 33rd Street #33
X Add			Hialeah FL 33013
Remove 3) Change			
Add			
Remove			
4) Change			
Add			
Remove			
5) Change			
Add			
Remove			
6) Change		<u> </u>	
Add			
Remove			

ttach additional sheets, if necessary).	cles, enter change(s) h			
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an amendment provides for an exch provisions for implementing the ame	tange, reclassification,	or cancellation of	issued snares, ent itself:	
(if not applicable, indicate N/A)	nument ii not comaine	u ta the amendan		
(9				
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		<u> </u>		

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The date of each amendment(s) ac	loption:	, if other than the
date this document was signed.		
Effective date <u>if applicable</u> :	(no more than 90 days after amendment file a	
 -	(no more than 90 days after amendment file a	late)
Note: If the date inserted in this bidocument's effective date on the De	lock does not meet the applicable statutory filing requirer partment of State's records.	ments, this date will not be listed as the
Adoption of Amendment(s)	(<u>CHECK ONE</u>)	
The amendment(s) was/were ado action was not required.	pted by the incorporators, or board of directors without sha	areholder action and shareholder
☐ The amendment(s) was/were ado by the shareholders was/were su	pted by the shareholders. The number of votes east for the fficient for approval.	: amendment(s)
☐ The amendment(s) was/were app must be separately provided for	roved by the shareholders through voting groups. The folleach voting group entitled to vote separately on the amend	owing statement lment(s):
"The number of votes east	for the amendment(s) was/were sufficient for approval	
by		
	(voting group)	
Dated	January 6, 2021	
Signature	-OL	
(H o ∕a di	rector, president or other officer – if directors or officers h I, by an incorporator – if in the hands of a receiver, trustee.	ave not been or other court
	ed fiduciary by that fiduciary)	William Court
	Juan E Diaz	
	(Typed or printed name of person signing)	
	President	
	(Title of person signing)	