P18000058501

(Requestor's Name)
(Address)
(Address)
(City/State/Zip/Phone #)
PICK-UP WAIT MAIL
(Business Entity Name)
(Document Number)
Certified Copies Certificates of Status
Special Instructions to Filing Officer:
_ ` _

Office Use Only



700317413857

08/22/18--01009--014 **35.00

2018 AUG 22 AM 10: 51
SECRETARY OF STATE

C GOLDEN AUG 2 4 2018

COVER LETTER

TO: Amendment Section Division of Corporations

Tallahassee, Fl. 32314

NAME OF CORPO	RATION: ARISTEK INTER	NATIONAL CORP				
	BER: P18000058501					
The enclosed Articles	The enclosed Articles of Amendment and fee are submitted for filling.					
Please return all corre	espondence concerning this ma	tter to the following:				
	Name of Contact Person					
	RS ACCOUNTING AND TAX SERVICES INC					
	Firm/ Company					
	3441 MERRICK LANE					
	Address					
	MARGATE FL 33063					
		City/ State and Zip Cod	e			
For further information	E-mail address: (to be us	sed for future annual report se call:	notification)			
		at ()de & Daytime Telephone Number			
Name	of Contact Person	Area Co	de & Daytime Telephone Number			
Enclosed is a check for	or the following amount made	payable to the Florida Depi	iriment of State:			
■ \$35 Filling 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		Ameno Divisio	Address Iment Section on of Corporations Building			

2661 Executive Center Circle Tallahassee, FL 32301

Articles of Amendment to Articles of Incorporation

FILED

2018 AUG 22 AM 10: 51

ARISTEK INTERNATIONAL CORP

(Name of Corporation as currently filed with the Florida Dept. of State) SECRETARY OF STATE TALLAHASSEF, FI (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) to its Articles of Incorporation: A. If amending name, enter the new name of the corporation: N/A 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 "PA" B. Enter new principal office address, if applicable: (Principal office address MUST BE A STREET ADDRESS) C. Enter new mailing address, if applicable: N/A (Mailing address MAY BE A POST OFFICE BOX) D. 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 office address: Name of New Registered Agent (Florida street address) , Florida <u>N</u>/A New Registered Office Address: (City) New Registered Agent's Signature, if changing Registered Agent: Thereby accept the appointment as registered agent. I am familiar with and accept the obligations of the position

Signature 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: X Change	<u>PT</u>	John Dog	
X Remove	$\underline{\mathbf{V}}$	Mike Jones	
X Add	<u>sv</u>	Sally Smith	
Type of Action (Check One)	Title	<u>Name</u>	<u>Addres</u> s
1) Change	SEC	RODRIGO P SILVA	3441 MERRICK LANE
XAdd			MARGATE FL 33063
Remove			
2) Change			
Add			
Remove			
3) Change			
Add			
Remove			
4) Change			
Add			
Remove			
5) Change			-
Add			
Remove			
6) Change			
Add			
Remove			

E. If amending or adding additional Articles, enter change(s) here: (Attach additional sheets, if necessary).—(Be specific)	
N/A	
	
F. If an amendment provides for an exchange, reclassification, or cancellation of issu	ed shares,
provisions for implementing the amendment if not contained in the amendment it (if not applicable, indicate N.A.)	<u>self:</u>
N/A	
	

	08/16/2018	
The date of each amendment(s) date this document was signed.	adoption:	if other than the
	/16/2018	
Effective date <u>if applicable</u> :	(no more than 90 days after amendment file date)	
Note: If the date inserted in this document's effective date on the I	block does not meet the applicable statutory filing requirements, the Department of State's records.	is date will not be listed as the
Adoption of Amendment(s)	(<u>CHECK ONE</u>)	
■ The amendment(s) was/were as by the shareholders was/were:	dopted by the shareholders. The number of votes cast for the amenda sufficient for approval.	nent(s)
	oproved by the shareholders through voting groups. The following start each voting group entitled to vote separately on the amendment(s)	uement
"The number of votes car	t for the amendment(s) was/were sufficient for approval	
by		
	(voting group)	
☐ The amendment(s) was/were action was not required.	dopted by the board of directors without shareholder action and share	holder
☐ The amendment(s) was/were acation was not required.	dopted by the incorporators without shareholder action and sharehold	r
08/16/20 Dated Signature	directors president or other officer – if directors or officers have not be	occn
	ed, by an incorporator if in the hands of a receiver, trustee, or other need fiduciary by that fiduciary)	court
	KARINA F DOS SANTOS ARBIZU.	
	(Typed or printed name of person signing)	
	PRESIDENT	
	(Title of person signing)	