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Florida Department of State
Division of Corporations
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Division of Corporations
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From:

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Account Number : 120190000092
Phone : (754) 202-8663
Fax Number : (754) 636-2620

R. V. T.
APR 20 2021

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LUCAS'ARTS CORP**

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COVER LETTER

TO: Amendment Section
Division of Corporations

NAME OF CORPORATION: LUCAS'ARTS CORPDOCUMENT NUMBER: P18000059695The enclosed *Articles of Amendment* and fee are submitted for filing

Please return all correspondence concerning this matter to the following:

XIANNY CHINCHILLA

Name of Contact Person

FLL BUSINESS SOLUTION CORP

Firm/ Company

8350 W STATE ROAD 84

Address

DAVIE, FL. 33324

City/ State and Zip Code

FLL.Business@outlook.com

E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

XIANNY CHINCHILLA

Name of Contact Person

at (754)202-8663

Area Code & Daytime Telephone Number

Enclosed is a check for the following amount made payable to the Florida Department of State:



\$35 Filing Fee

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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
Tallahassee, FL 32303

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Articles of Amendment
to
Articles of Incorporation
of

LUCAS'ARTS CORP

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

P18000059695

(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:

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. Enter new principal office address, if applicable:

(Principal office address MUST BE A STREET ADDRESS)

C. Enter new mailing address, if applicable:

(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

F.L.I. BUSINESS SOLUTION CORP

8350 W STATE ROAD 84

(Florida street address)

New Registered Office Address:

DAVIE

Florida 33324

(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.

Signature of New Registered Agent, if changing

Check if applicable

☒ The amendment(s) is/are being filed pursuant to s. 607.0120 (11) (c), F.S.

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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:

☒ Change PT John Doe

☐ Remove V Mike Jones

☒ Add SV Sally Smith

Type of Action (Check One)	Title	Name	Address
1) <input checked="" type="checkbox"/> Change	P	MANUELA MUNERA DIAZ	19999 E COUNTRY CLUB DR
<input type="checkbox"/> Add			APT 401
<input type="checkbox"/> Remove			AVENTURA, FL. 33180
2) <input checked="" type="checkbox"/> Change	VP	GIANLUCA MUSU	19999 E COUNTRY CLUB DR
<input type="checkbox"/> Add			APT 401
<input type="checkbox"/> Remove			AVENTURA, FL. 33180
3) <input type="checkbox"/> Change			
<input type="checkbox"/> Add			
<input type="checkbox"/> Remove			
4) <input type="checkbox"/> Change			
<input type="checkbox"/> Add			
<input type="checkbox"/> Remove			
5) <input type="checkbox"/> Change			
<input type="checkbox"/> Add			
<input type="checkbox"/> Remove			
6) <input type="checkbox"/> Change			
<input type="checkbox"/> Add			
<input type="checkbox"/> Remove			

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E. If amending or adding additional Articles, enter change(s) here:

(Attach additional sheets, if necessary). (Be specific)

THE PURPOSE FOR WHICH THIS CORPORATION IS ORGANIZED IS:

PROVIDE SERVICES AS GENERAL CONTRACTOR AND OTHER SERVICES RELATED WITH REMODELING,
CONSTRUCTION TO RESIDENTIAL AND COMMERCIAL BUILDING AND ANY ALL LAWFULL BUSINESS.

**F. If 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)

THE NUMBER OF SHARES THE CORPORATION IS AUTHORIZED TO ISSUE WILL BE CHANGE TO 100 SHARES
DISTRIBUTED AS FOLLOW: 51 SHARES WILL BE ASSIGNED TO MANUELA MUNERA AND 49 SHARE WILL
BE ASSIGNED TO GIANLUCA MUSU.

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04/19/2021

The date of each amendment(s) adoption: _____, if other than the date this document was signed.

Effective date if applicable: 04/19/2021

(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 the 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 incorporators, or board of directors without shareholder action and shareholder action was not required.

☒ 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)

04/19/2021
Dated _____

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)

MANUELA MUNERA DIAZ

(Typed or printed name of person signing)

PRESIDENT

(Title of person signing)

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