P18000061692

(Red	questor's Name)	
(Add	dress)	
(Ad	dress)	
(Cit	y/State/Zip/Phone #	f)
PICK-UP	☐ WAIT	MAIL
(Bu	siness Entity Name	è)
(Do	ocument Number)	
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COVER LETTER

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Tallahassee, FL 32301

TO: Amendment Section Division of Corporations

NAME OF CORPORATION:RALO	S CORP	
DOCUMENT NUMBER: P18000061692		
The enclosed Articles of Amendment and fee ar	re submitted for filing.	
Please return all correspondence concerning this	matter to the following:	
DANILO CAMELLON		
	Name of Contact Person	
RALOS CORP		
	Firm/ Company	
24008 SW 111th AV	VE	
 	Address	
HOMESTEAD, FL 330	032	
	City/ State and Zip Code	
ralosygrene@gmail.com		
E-mail address: (to b	be used for future annual report notification)	
For further information concerning this matter, p	please call:	
DANILO CAMELLON	786 856-0909	
Name of Contact Person	Area Code & Daytime Telephone Number	
Enclosed is a check for the following amount ma	ade payable to the Florida Department of State:	
S35 Filing Fee		
Mailing AddressStreet AddressAmendment SectionAmendment SectionDivision of CorporationsDivision of Corporations		
P.O. Box 6327 Tallahassee, FL 32314	Clifton Building 2661 Executive Center Circle	

Articles of Amendment to **Articles of Incorporation**

of

	a	of Control	12 3
RALOS CORP			
(<u>Name o</u>	f Corporation as curren	tly filed with the Florida Do	ept. of State)
P18000061692			25 C
······································	(Document Number	of Corporation (if known)	
ursuant to the provisions of section 607. s Articles of Incorporation:	1006, Florida Statutes, thi	s Florida Profit Corporation	adopts the following amending
. If amending name, enter the new na	me of the corporation:		Ę.
√/A			The ne
ame must be distinguishable and cont Corp.," "Inc.," or Co.," or the design ord "chartered," "professional associa	ation "Corp." "Inc," or	"Co". A professional corpo "P.A."	
B. Enter new principal office address, Principal office address MUST BE A ST		N/A	
(Mailing address MAY BE A POST of the control of th		dress in Florida, enter the n	name of the
new registered agent and/or the nev			
Name of New Registered Agent	N/A		
	(Florida s	treet address)	
New Registered Office Address:	N/A		, Florida N/A
		(City)	(Zip Code)
New Registered Agent's Signature, if cl hereby accept the appointment as regist			ions of the position.
	Signature of New	Registered Agent, if changin	Ig

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 Doe	
X Remove	<u>V</u>	Mike Jones	
X Add	<u>sv</u>	Sally Smith	
Type of Action (Check One)	Title	<u>Name</u>	<u>Addres</u> s
1) Change	PT	LUIS A. CURBELO VALLE	24008 SW 111th AVE
Add			HOMESTEAD, FL 33032
X Remove		,	
2) X Change	РТ	DANILO CAMELLON	24008 SW 111th AVE
Add			HOMESTEAD, FL 33032
Remove			
3) Change		N/A	
Add			
Remove			
4) Change		N/A	
Add			
Remove			
5) Change		N/A	
Add			
Remove			
6) Change		N/A	
Add			
Remove			

C. If amending or adding additional Arti- (Attach additional sheets, if necessary).	(Be specific)
N/A	
· · · · · · · · · · · · · · · · · · ·	
· · · · · · · · · · · · · · · · · · ·	<u> </u>
If an amendment provides for an excha	ange, reclassification, or cancellation of issued shares,
provisions for implementing the amen	ndment if not contained in the amendment itself:
(if not applicable, indicate N/A)	
/A	
-	

• *	OCTOBER 1st, 2018	
The date of each amendment(s) date this document was signed.	adoption:	, if other than the
Effective date <u>if applicable</u> :	OCTOBER 1st, 2018	
<u>и прришие</u>	(no more than 90 days after amendment file date)	
Note: If the date inserted in thi document's effective date on the	s block does not meet the applicable statutory filing requirements, the Department of State's records.	nis date will not be listed as the
Adoption of Amendment(s)	(<u>CHECK ONE</u>)	
The amendment(s) was/were a by the shareholders was/were	idopted by the shareholders. The number of votes cast for the amendr sufficient for approval.	nent(s)
☐ The amendment(s) was/were a must be separately provided j	approved by the shareholders through voting groups. The following start or each voting group entitled to vote separately on the amendment(s)	atement :
"The number of votes ca	st for the amendment(s) was/were sufficient for approval	
by N/A		
	(voting group)	
☐ The amendment(s) was/were a action was not required.	dopted by the board of directors without shareholder action and share	holder
☐ The amendment(s) was/were a action was not required.	dopted by the incorporators without shareholder action and sharehold	er
11/20/2 Dated	2018	
Signature		
(By a selec	director, president or other officer – if directors or officers have not be ted, by an incorporator – if in the hands of a receiver, trustee, or other inted fiduciary by that fiduciary)	ocen court
	LUIS A. CURBELO VALLE	
	(Typed or printed name of person signing)	.
	PRESIDENT	
	(Title of person signing)	

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