P18000064164

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(Business Entity Name)
(Document Number)
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COVER LETTER

TO: Amendment Section Division of Corporations

NAME OF CORPORATION: ______

DOCUMENT NUMBER: P18000064164

The enclosed Articles of Amendment and fee are submitted for filing.

Please return all correspondence concerning this matter to the following:

MANUEL E MORE LEZAMA

Name of Contact Person

MIAMORE ENTERPRISE CORP

Firm/ Company

209 LONE DOVE LN

Address

BRADENTON, FLORIDA 34212

City/ State and Zip Code

ELVISMORE66@HOTMAIL.COM

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

For further information concerning this matter, please call:

 MANUEL E MORE LEZAMA
 at (94)
 4138316

 Name of Contact Person
 Area Code & Daytime Telephone Number

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

🖬 \$35 Filing Fee

□\$43.75 Filing Fee & Certificate of Status

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Mailing Address Amendment Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314

<u>Street Address</u> Amendment Section Division of Corporations Clifton Building 2661 Executive Center Circle Fatlahassee, 14, 32301

□\$52.50 Filing Fee

Certified Copy

(Additional Copy is enclosed)

Certificate of Status

Articles of Amendment to Articles of Incorporation of

MIAMORE ENTERPRISE CORP

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

P18000064164

(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) 209 LONE DOVE LN

BRADENTON FL 34212

C. <u>Enter new mailing address, if applicable:</u> (Mailing address <u>MAY BE A POST OFFICE BOX</u>)

209 LONE DOVE LN

	DKA			
				
D. If amending the registered agent : new registered agent and/or the n	<u>ind/or registered office address in l</u> ew registered office address:	Florida, enter the name of the	AUG - 6	
Name of New Registered Agen	JAVIER M HERRERA	ایر. بدر		ίΤi Γ
	209 LONE DOVE LN	COR		Ú.
	(Florida street addr	ess)	<u>ം</u> ത	
New Registered Office Address	BRADENTON	=	212	
	(City)		(Zip Code))

New Registered Agent's Signature, if changing Reg	gistered 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

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:

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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.

<u>X</u> Change	<u> </u>	John Doe	
X Remove	<u>V</u>	Mike Jones	
<u>X</u> Add	<u>sv</u>	Sally Smith	
Type of Action (Check One)	<u>Title</u>	Name	Address
1) Change	VP —	ROMY E AREVALO DE MORE	209 LONE DOVE LN
Add Remove			BRADENTON FL 34212
2) X Change	VP	JAVIER M HERRERA	209 LONE DOVE LN
Add			BRADENTON FL 34212
Remove			
3) Change			
Add			
Remove			<u></u>
4) Change Add			19 AUG - 5 P
Remove			PH I: 55
Add			
Remove			
б) Change Add			
Remove			

E.	If amending or adding a	<u>idditional</u>	Articles,	enter chang	e(s) here:
	(Attack				

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

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) CANCELLATION OF ISSUED SHARE TO ROMY E AREVALO DE MORE		
	19 AUG - 6 PH 1: 56	

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The date of each amendment(s) adoption:	, if other than (
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 document's effective date on the Department of State's records.	not be listed as
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.	
\Box 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)	
(voting group)	19
□ 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.	6 PH IS
Dated	÷₽6
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)	
MANUEL E MORE LEZAMA	
(Typed or printed name of person signing)	
PRESIDENT	
(Title of person signing)	<u> </u>