P18000070353

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700369530437 amend

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COVER LETTER

TO: Amendment Section Division of Corporations

NAME OF CORPOR	RATION: ANGELS ON EAR	RTH PPEC INC				
DOCUMENT NUMI	BER: P18000070353					
	of Amendment and fee are su	bmitted for filing.				
Please return all corre	spondence concerning this ma	tter to the following:				
	ALEODA CABRERA					
		Name of Contact Person	n			
	ANGELS ON EARTH PPEC, INC					
	Firm/ Company					
	12200 MENTA ST SUITE 10	05				
	Address					
	ORLANDO. FL 32837					
		City/ State and Zip Cod	e			
	INFO@ANGELSONEARTH	ІРРЕС.СОМ				
	E-mail address: (to be us	sed for future annual report	notification)			
For further information	n concerning this matter, pleas	se call:				
ALEIDA CABRERA		at (7572257			
Name o	of Contact Person	Area Co	de & Daytime Telephone Number			
Enclosed is a check fo	r the following amount made	payable to the Florida Depa	artment of State:			
■ \$35 Filing Fee	□\$43.75 Filing Fee & Certificate of Status	S43.75 Filing Fee & Certified Copy (Additional copy is enclosed)	☐\$52.50 Filing Fee Certificate of Status Certified Copy (Additional Copy is enclosed)			
Ame Divi P.O.	ndment Section sion of Corporations Box 6327 thassee, FL 32314	Amend Divisio The C 2415 i	Address Iment Section on of Corporations entre of Tallahassee N. Monroe Street, Suite 810 assee, FL 32303			

Articles of Amendment Articles of Incorporation of

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2021 JUL 12 AMII: 05

ANGELS ON EARTH PPEC, INC

(Name of Corporatio	n as currently filed with the Florida Dept. of State)
P18000070353	THE MASSES FRANCE
(Docume	ent Number of Corporation (if known)
Pursuant to the provisions of section 607.1006, Florida ts Articles of Incorporation:	Statutes, this Florida Profit Corporation adopts the following amendment(s)
A. If amending name, enter the new name of the con	poration:
	The new
	rporation," "company," or "incorporated" or the abbreviation "Corp.," or "Co". A professional corporation name must contain the word viation "P.A."
3. Enter new principal office address, if applicable:	
Principal office address <u>MUST BE A STREET ADD</u>	RESS)
C. Enter new mailing address, if applicable:	
(Mailing address MAY BE A POST OFFICE BOX	<u> </u>
	-
). If amending the registered agent and/or registere	
new registered agent and/or the new registered o	ffice address:
Name of New Registered Agent	
	(Florida street address)
New Registered Office Address:	, Florida
	(City)
New Registered Agent's Signature, if changing Regis	stered Agent:
hereby accept the appointment as registered agent. I	am familiar with and accept the obligations of the position.
Signat	ture of New Registered Agent, if changing

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	PT	John Doe	<u>:</u>	
X Remove	<u>V</u>	Mike Jon	<u>nes</u>	
X Add	<u>sv</u>	Sally Sm:	<u>ith</u>	
Type of Action (Check One)	<u>Title</u>	<u>.</u>	<u>Name</u>	<u>Addres</u> s
1) Change	S		JUAN DELGADO	2691 MUSCATELLO ST
Add				ORLANDO, FL 32837
X Remove				
2) Change				
Add				
Remove 3) Change				
Add				
Remove				
4) Change				
Add				
Remove				
5) Change				
Add				
Remove				
6) Change				
Add				
Remove				

	or adding additional Aronal sheets, if necessary).	. (Be specific)			
		· · · · · · · · · · · · · · · · · · ·			
					
					·
				<u>.</u>	
			-		
f an amendn	nent provides for an exc	change, reclassificatio	n, or cancellation o	of issued shares,	
<u>provisions fo</u>	or implementing the am	<u>iendment if not conta</u>	ined in the amendo	nent itself:	
(if not ap	oplicable, indicate N/A)				
	·				
	. <u>.</u>				
					· · · · · · · · · · · · · · · · · · ·
	<u></u>				

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The date of each amendment(s) adoption:	_, if other than the
date this document was signed.		
Effective date if applicable:		
	(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, this date will Department of State's records.	not be listed as the
Adoption of Amendment(s)	(CHECK ONE)	
The amendment(s) was/were action was not required.	adopted by the incorporators, or board of directors without shareholder action and	shareholder
☐ The amendment(s) was/were by the shareholders was/were	adopted by the shareholders. The number of votes cast for the amendment(s) e sufficient for approval.	
	approved by the shareholders through voting groups. The following statement for each voting group entitled to vote separately on the amendment(s):	
"The number of votes ca	ast for the amendment(s) was/were sufficient for approval	
by	,**	
,	(voting group)	
	officer, president or other officer – if directors or officers have not been cited, by an incorporator – if in the hands of a receiver, trustee, or other court binted fiduciary by that fiduciary)	_
-74	ALEIDA CABRERA	
	(Typed or printed name of person signing)	
	PRESIDENT	
	(Title of person signing)	