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COVER LETTER

Division of Corp		•	•
NAME OF CORPO	RATION: ANGEL DETAIL I	INC	
	BER: P18000071014	_	
The enclosed Articles	s of Amendment and fee are su	bmitted for filing.	
Please return all corre	espondence concerning this ma	tter to the following:	
	ANGEL R BARRETO PERE	ZZ.	
		Name of Contact Person	n
	ANGEL DETAIL INC		
		Firm/ Company	
	9090 NW SOUTH RIVER D	R UNIT 33	
		Address	
	HIALEAH, FL 33166		
		City/ State and Zip Cod	c
	angeldetailinc@gmail.com		
	E-mail address: (to be us	ed for future annual report	notification)
For further information	on concerning this matter, pleas	se call:	
ANGEL R BARRET	O PEREZ	at (de & Daytime Telephone Number
Name	of Contact Person	Area Co	de & Daytime Telephone Number
Enclosed is a check f	or the following amount made		
■ \$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)
An Div P.C	niling Address nendment Section vision of Corporations D. Box 6327 Ilahassec, FL 32314	Amend Division The C 2415 I	Address Iment Section on of Corporations entre of Tallahassee N. Monroe Street, Suite 810 assee, FL 32303

Articles of Amendment to Articles of Incorporation of

ANGEL DETAIL INC.

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(Name of Corporati	on as currentl	y filed with the Florid	a Dept. of State)	
	P1800007	1014		
(Docum	nent Number of	Corporation (if know	1)	
Pursuant to the provisions of section 607.1006, Floridats Articles of Incorporation:	a Statutes, this I	Florida Profit Corpora	tion adopts the followi	ng amendment(s) t
A. If amending name, enter the new name of the co	orporation:			
				The new
name must be distinguishable and contain the word "co 'Inc.," or Co" or the designation "Corp," "Inc, 'chartered," "professional association," or the abbre	" or "Co". A			
3. Enter new principal office address, if applicable	e:			
Principal office address <u>MUST BE A STREET ADI</u>				
			<u> </u>	
C. Enter new mailing address, if applicable:				
(Mailing address <u>MAY BE A POST OFFICE BO</u>	<u>)X</u>)			
). If amending the registered agent and/or registe			he name of the	
new registered agent and/or the new registered	omice address:	<u>:</u>		
Name of New Registered Agent	 			_
	(Florida stre	eet address)		
New Registered Office Address:			Florida	
		(City)	(Zip	Code)
N . D				
New Registered Agent's Signature, if changing Reg hereby accept the appointment as registered agent.			igations of the position.	
7 7 11	,	1	0 / 1	
				_
Sign	ature of New Re	egistered Agent, if chai	iging	

Check if applicable

 \square 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)

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 Do	<u>c</u>	
X Remove	<u>v</u>	Mike Jo	nes	
X Add	<u>sv</u>	Sally Sn	<u>nith</u>	
Type of Action (Check One)	<u>Title</u>		Name	<u>Addres</u> s
1) Change	V		PEDRO J. BAUTISTA	3311 S BABCOCK ST
Add				1114, MELBOURNE, FL 32901
X Remove				
2) Change				
Add				
Remove Change		_		
Add				
Remove				
4) Change		_		
Add				
Remove				
5) Change	 .	_		
Add				
Remove				
6) Change	-			- <u>-</u>
Add				
Remove				

an amendment provides for an exchange, reclassification, or cancellation of issued shares, rovisions for implementing the amendment if not contained in the amendment itself: (if not applicable, indicate N/A)	amending or adding additional Art ttach additional sheets, if necessary).	(Be specific)				
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an amendment provides for an exchange, reclassification, or cancellation of issued shares, rovisions for implementing the amendment if not contained in the amendment itself: (if not applicable, indicate N/A)						
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The date of each amendment date this document was signed	t(s) adoption:	if other than the
Effective date if applicable:	AUGUST 3RD, 2020	
	(no more than 90 days after amendment file date)	
Note: If the date inserted in a document's effective date on to	this block does not meet the applicable statutory filing requirements, this date will he Department of State's records.	not be listed as the
Adoption of Amendment(s)	(CHECK ONE)	
■ The amendment(s) was/wer action was not required.	re adopted by the incorporators, or board of directors without shareholder action and s	shareholder
☐ The amendment(s) was/wer by the shareholders was/we	re adopted by the shareholders. The number of votes cast for the amendment(s) ere sufficient for approval.	
☐ The amendment(s) was/wer must be separately provide	e approved by the shareholders through voting groups. The following statement d 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		
DatedSignature	JST 19TH, 2020	_
sel	y a director, president or other officer if directors or officers have not been ected, by an incorporator – if in the hards of a receiver, trustee, or other court pointed fiduciary by that fiduciary)	
	ANGEL R. BARRETO PEREZ	
	(Typed or printed name of person signing)	
	PRESIDENT	
	(Title of person signing)	