P18000071154

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10/28/20--01009--010 **35.00



12/7/20

COVER LETTER

TO: Amendment Section Division of Corporations

NAME OF CORPO	RATION: CANVAS 1206 G	ROUP CORP			
DOCUMENT NUM	P18000071154				
The enclosed Articles	of Amendment and fee are su	bmitted for filing.			
Please return all corre	spondence concerning this ma	tter to the following:			
	A. Platon Alexandrakis				
	Name of Contact Person				
	Alexandrakis Law PLLC.				
	Firm/ Company				
	110 Merrick Way Suite 3A				
	Address				
	Coral Gables, Fl. 33134				
	City/ State and Zip Code				
	platon@alexandrakislaw.com				
	E-mail address: (to be us	sed for future annual report	notification)		
For further information	on concerning this matter, pleas	se call:			
A. Platon Alexandral	cis	786	8534769		
Name of Contact Person			de & Daytime Telephone Number		
Enclosed is a check for	or the following amount made	payable to the Florida Dep	urtment of State:		
S35 Filing Fee	□\$43.75 Filing Fee & Certificate of Status	□\$43.75 Filing Fee & Certified Copy (Additional copy is enclosed)	☐\$52.50 Filing Fee Certificate of Status Certified Copy (Additional Copy is enclosed)		
Mailing Address Amendment Section Division of Corporations P.O. Box 6327 Tallahassee, F1, 32314		Street Address Amendment Section Division of Corporations The Centre of Tallahassee 2415 N. Monroe Street, Suite 810 Tallahassee, FL 32303			

Articles of Amendment to Articles of Incorporation of

FILED

2020 OCT 28 PM 5: 03

CANVAS 1206 GROUP CORP		2020 001 20 11: 3. 03	
(Name	of Corporation as curre	ntly filed with the Florida OFFICE STATE	
P18000071154		TALLAHOSSEE, FL	
	(Document Number	of Corporation (if known)	
Pursuant to the provisions of section 607 its Articles of Incorporation:	.1006. Florida Statutes, th	is Florida Profit Corporation adopts the following amendment(s)	
A. If amending name, enter the new n	ame of the corporation:		
		The new	
	Corp," "Inc," or "Co".	"company," or "incorporated" or the abbreviation "Corp.," A professional corporation name must contain the word	
B. Enter new principal office address,	if applicable:	110 Merrick Way	
(Principal office address MUST BE A S	TREET ADDRESS)	Suite 3A	
		Coral Gables, FL 33134	
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)		110 Merrick Way	
		Suite 3A	
		Coral Gables, FL 33134	
D. If amending the registered agent ar new registered agent and/or the new		dress in Florida, enter the name of the ess:	
Name of New Registered Agent	Alexandrakis Law, PLLC		
	110 Merrick Way Suite	3A	
	(Florida .	street address)	
New Registered Office Address:	Coral Gables	. Florida	
		(City) (Zip Code)	
		,	
New Registered Agent's Signature, if c	hanging Registered Age	nt·	
I hereby accept the appointment as regist	tered agent. I am familia	r with and accept the obligations of the position.	
	Cirmutana of Com	Destroyet from if changing	
	Signature of Now	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	PI John	<u> 1 Doe</u>	
X Remove	<u>V</u> <u>Mik</u>	e Jones	
X Add	SV Sall	v Smith	
Type of Action (Check One)	<u>Title</u>	<u>Name</u>	<u>Addres</u> s
1) Change	D.P.T.S	Mendez Mendoza Ruben Dario	9300 PEABODY STREET
Add			SUITE 208
X Remove			MANASSAS, VA 20110
2) Change	D, P	A. Platon Alexandrakis	110 Merrick Way
X Add			Suite 3A
Remove 3) Change			Coral Gables, FL 33134
Add			
Remove			
4) Change			
Add			
Remove			
5) Change			
Add			
Remove			
6) Change			
Add			
Remove			

Attach <i>addit</i>	or adding additional Articles, ional sheets, if necessary). (Be	specific)		
			-	
				
			- "	<u> </u>
				
fan amand	ment provides for an exchange	realestification or cons	illation of iccord charge	
provisions	for implementing the amendme	ent if not contained in the	amendment itself:	
(if not c	pplicable, indicate N/A)			
				
	- -			
		-		
	· · · · · · · · · · · · · · · · · · ·			

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The date of each amendment(s) date this document was signed.	adoption:	, it other than the
Effective date <u>if applicable</u> :		
	(no more than 90 days after amendment file	e date)
Note: If the date inserted in this document's effective date on the I	block does not meet the applicable statutory filing requir Department of State's records.	rements, this date will not be listed as the
Adoption of Amendment(s)	(<u>CHECK ONE</u>)	
The amendment(s) was/were a action was not required.	dopted by the incorporators, or board of directors without s	hareholder action and shareholder
☐ The amendment(s) was/were as by the shareholders was/were	dopted by the shareholders. The number of votes east for t sufficient for approval.	he amendment(s)
	oproved by the shareholders through voting groups. The for each voting group entitled to vote separately on the ame.	
"The number of votes car	st for the amendment(s) was/were sufficient for approval	
Board of Directors		
	(voting group)	
10.12.20 Dated		
Signature	+	
select	director, president or other officer—if directors or officers ed, by an incorporator—if in the hands of a receiver, trustented fiduciary by that fiduciary)	
	A. Platon Alexandrakis	
	(Typed or printed name of person signing)	
	Director	
	(Title of person signing)	