## P18 000074119

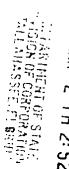
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MAR 21 2020 S. YOUNG



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## **COVER LETTER**

**TO:** Amendment Section Division of Corporations

NAME OF CORPO	RATION: 3S ENTERPRISES	S FL, INC			
	BER: P18000074119				
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:			
	ILLIA I RIVAS				
	Name of Contact Person				
	3S ENTERPRISES FL, INC				
		Firm/ Company			
	1106 W OAK ST SUITE C-1				
		Address	· · · · · · · · · · · · · · · · · · ·		
	KISSIMMEE FL, 34741				
		City/ State and Zip Cod	e		
	3SEINFO@GMAIL.COM				
	E-mail address: (to be us	sed for future annual report	notification)		
For further information	on concerning this matter, pleas		773-5622		
	of Contact Person	at (407	)de & Daytime Telephone Number		
	or the following amount made				
S35 Filing Fee	□\$43.75 Filing Fee & Certificate of Status	☐S43.75 Filing Fee & Certified Copy (Additional copy is enclosed)	S52.50 Filing Fee Certificate of Status Certified Copy (Additional Copy is enclosed)		
Mailing Address Amendment Section Division of Corporations P.O. Box 6327 Tallahassee, FL 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

3S ENTERPRISES FL. INC

55 ENTERN RISES FL, INC	d St. Mark Charles (Sec.)
P18000074119	ently filed with the Florida Dept. of State)
	er of Corporation (if known)
Pursuant to the provisions of section 607.1006, Florida Statutes, thi 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," "Inc.," or Co.," or the designation "Corp," "Inc.," or "Co". "chartered," "professional association," or the abbreviation "P.A	A professional corporation name must contain the word
B. Enter new principal office address, if applicable: (Principal office address MUST BE A STREET ADDRESS)	
(Frincipal office duaress SIOST BE ASTREET ADDRESS)	
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)	2020 HAT 17
D. If amending the registered agent and/or registered office ad new registered agent and/or the new registered office addre	
	<del></del>
Name of New Registered Agent	
(Florida s	street address)
New Registered Office Address:	, Florida (City) (Zip Code)
New Registered Agent's Signature, if changing Registered Agent I hereby accept the appointment as registered agent. I am familian	ent: or with and accept the obligations of the position
The contract of the second of	This are the configuration of the production
Signature of New	v Registered Agent, if changing
Check if applicable	
☐ The amendment(s) is/are being filed pursuant to s. 607.0120 (11	1) (e), F.S.

If amending the Officers and/or Directors, enter the title and name of each officer/director being removed and title, name, an 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 = Chie 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)	<u>Title</u>	Name	<u>Addres</u> s
1) Change	VP	WILLARD C RAMOS	5515 PAT RD
X Add			WESLEY CHAPEL
Remove			FL 33543
2) Change			
Add			
Remove 3 ) Change			
Add			
Remove			
4) Change			_
Add			
Remove			
5) Change			
Add			
Remove			
6) Change			
Add			
Remove			

(Attach additional sheets, if necessary)	rticles, enter change(s) here: (). (Be specific)
<del></del>	
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. If an amendment provides for an ex	schange, reclassification, or cancellation of issued shares,
provisions for implementing the an	mendment if not contained in the amendment itself:
(if not applicable, indicate N/A)	

•	2.28.20	
The date of each amendment(s)	adoption:	, if other than the
date this document was signed.		
2.	8.20	
Effective date <u>if applicable</u> :	(no more than 90 days after amendment file	· date)
Note: If the date inserted in this document's effective date on the	block does not meet the applicable statutory filing require Department of State's records.	ements, this date will not be listed as the
Adoption of Amendment(s)	(CHECK ONE)	
The amendment(s) was/were a action was not required.	dopted by the incorporators, or board of directors without sl	hareholder action and shareholder
☐ The amendment(s) was/were a by the shareholders was/were	dopted by the shareholders. The number of votes east for the sufficient for approval.	he amendment(s)
	oproved by the shareholders through voting groups. The for each voting group entitled to vote separately on the amer	
"The number of votes ca	st for the amendment(s) was/were sufficient for approval	
by	<u>.</u> "	
	(voting group)	
Dated	2.28.20	
Signature	& Kuga	
(By a selec	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)	
	ILLIA I RIVAS	
	(Typed or printed name of person signing)	
	PRESIDENT	
	(Title of person signing)	