## P18000077849

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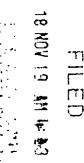
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S. TALLENT NOV 2 9 2018



Mand

## **COVER LETTER**

**TO:** Amendment Section Division of Corporations

NAME OF CORPOR	ATION: SOMOZA CORP	<u>-</u>	
DOCUMENT NUMBI	ER: P18000077849		
	<i>f Amendment</i> and fee are su	bmitted for filing.	
Please return all corresp	ondence concerning this ma	tter to the following:	
5	SOMOZA, BLANCA A		
-		Name of Contact Persor	1
9	SOMOZA CORP		
<u>-</u>		Firm/ Company	<del>_</del>
•	7501 E TREASURE DR AP	, <u>-</u>	
-	<del></del>	Address	
}	NORTH BAY VILLAGE FE		
<u>-</u>		City/ State and Zip Code	<u> </u>
		chy state and my cou	•
SOMO	ZACORPORATION@GM.		V
	E-mail address: (to be us	sed for future annual report	notification)
For further information	concerning this matter, pleas	se call:	
SOMOZA, BLANCA	A	at (	263-3488
Name of	Contact Person		de & Daytime Telephone Number
Enclosed is a check for	the following amount made	payable to the Florida Depa	irtment of State:
■ \$35 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)
Amer Divis P.O.	ng Address Idment Section Idment Sec	Amend Divisio Clifton 2661 E	Address ment Section on of Corporations Building xecutive Center Circle assee, F1, 32301

## Articles of Amendment to Articles of Incorporation of

SOMOZA CORP	
( <u>Name of Corporatio</u> P18000077849	on as currently filed with the Florida Dept. of State)
(Docum	nent Number of Corporation (if known)
Pursuant to the provisions of section 607.1006, Florida its Articles of Incorporation:	Statutes, this Florida Profit Corporation adopts the following amendment(s)
A. If amending name, enter the new name of the co	rporation:
	The new d "corporation," "company," or "incorporated" or the abbreviation ""Inc," or "Co". A professional corporation name must contain the abbreviation "P.A."
B. Enter new principal office address, if applicable: (Principal office address MUST BE A STREET ADD	
Frincipal Office address SIOST BE A STREET ADD	——————————————————————————————————————
	<u> </u>
C. Enter new mailing address, if applicable:	
(Mailing address <u>MAY BE A POST OFFICE BQ)</u>	
D. If amending the registered agent and/or registered new registered agent and/or the new registered of	ed office address in Florida, enter the name of the office address:
Name of New Registered Agent	
	(Florida street address)
New Registered Office Address:	
	(City) (Zip Code)
New Registered Agent's Signature, if changing Reging hereby accept the appointment as registered agent.	stered Agent: I am familiar with and accept the obligations of the position.
	ture 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)

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	PT	John Doe		
$\underline{X}$ 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) X Change	VP	CUELLAR DE SOMOZ	A. LAURA 7501 E TREASURE DR APT 5E 1	
Add			NORTH BAY VILLAGE	
Remove			FL, 33141	
2) X Change	T	SOMOZA, BLANCA A	14500 SW 88 AVE APT 229	
Add			PALMETO BAY	
Remove			FL. 33176	
3 ) Change				
Add				
Remove				
4) Change		_		
Add				
Remove				
5) Change		_		
Add				
Remove				
6) Change				
Add				
Remove				

Attach addition	adding additional Arti Il sheets, if necessary).	(Be specific)			
Attach tataninn	ranceia, if necessaria	the specific			
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<u>f an amendme</u>	<u>it provides for an evch</u>	ange, reclassificat	<u>ion, or cancellati</u>	on of issued shar	es,
	implementing the ame	ndment if not con	tained in the ame	<u>ndment itself:</u>	
(if not app	icable, indicate NA)				
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					_

•	OCTOBER-29-2018
The date of each amendment(s)	adoption: if other than the
date this document was signed.	
	CTOBER-29-2018
Effective date <u>if applicable</u> :	(no more than 90 days after amendment file date)
	(no more than 90 days after amenament file date)
Note: If the date inserted in this document's effective date on the I	block does not meet the applicable statutory filing requirements, this date will not be listed as the Department of State's records.
Adoption of Amendment(s)	( <u>CHECK ONE</u> )
■ The amendment(s) was/were a by the shareholders was/were	dopted by the shareholders. The number of votes cast for the amendment(s) sufficient for approval.
☐ The amendment(s) was/were a must be separately provided for	pproved by the shareholders through voting groups. The following statement for each voting group entitled to vote separately on the amendment(s):
	st for the amendment(s) was/were sufficient for approval
by	(voting group)
•	(voting group)
☐ The amendment(s) was/were a action was not required.	dopted by the board of directors without shareholder action and shareholder
☐ The amendment(s) was/were a action was not required.	dopted by the incorporators without shareholder action and shareholder
10/29/20	18
Dated	
Signature (	Living Control of the
	director, president or other officer – if directors or officers have not been
	ted, by an incorporator – if in the hands of a receiver, trustee, or other court
	inted fiduciary by that fiduciary)
	SOMOZA SANTOS. JOSE
	(Typed or printed name of person signing)
	P = President
	(Title of person signing)