## P180000 79783

(Re	equestor's Name)			
(Address)				
(Ad	ldress)	<del></del> .		
(Cit	ty/State/Zip/Phone	e #)		
PICK-UP	☐ WAIT	MAIL		
(Bu	isiness Entity Nan	ne)		
(Do	ocument Number)			
Certified Copies	_ Certificates	s of Status		
Special Instructions to Filing Officer:				

Office Use Only

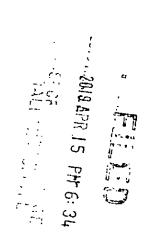
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## **COVER LETTER**

TO: Amendment Section Division of Corporations

SUBJECT: Edgexecution Corp

Name of Corporation

DOCUMENT NUMBER: P18000079783

The enclosed Statement of Change of Registered Office/Agent and fee are submitted for filing.

Please return all correspondence concerning this matter to the following:

Eduardo Ottengo

Name of Contact Person

**Edgexecution Corp** 

Firm/Company

2930 Catalina St

Address

Miami, FL, 33133

City/State and Zip Code

eottengo@gmail.com

E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Eduardo Ottengo

,,305 ,98763

Name of Contact Person

Area Code & Daytime Telephone Number

Enclosed is a \$35.00 check made payable to the Department of State.

Mailing Address:

Amendment Section
Division of Corporations
P.O. Box 6327
Tallahassee, FL 32314

**Street Address:** 

Amendment Section
Division of Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, FL 32301

Division of Corporations

April 2, 2019

EDUARDO OTTENGO 2930 CATALINA ST MIAMI, FL 33133

SUBJECT: EDGEXECUTION, CORP.

Ref. Number: P18000079783

We have received your document for EDGEXECUTION, CORP. and your check(s) totaling \$35.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

MYRNA VALLE is not the registered agent for the above referenced entity. If you are trying to amend the name of an officer/director, please see the enclosed information. If not, please see the enclosed computer print out of the current registered agent on file with this office and correct your document accordingly.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6050.

Letter Number: 719A00006513

Rebekah White Regulatory Specialist III

www.sunbiz.org

## Articles of Amendment to

FILED

## Articles of Incorporation

SOLD ADD 15 PH 6: 34

<del>_</del>	١	of	2019 APR 13	) [[ 0· 0·
FD6EXECUTI	_	CORP		<u> </u>
(Name of Corporati	on as cur	rently filed with the F	lorida Dept. of Sta	<u>te</u> ), 1' l
P18,0000	3797	<u>83                                    </u>		
(Docum	nent Numl	er of Corporation (if k	nown)	
Pursuant to the provisions of section 607.1006, Floridates Articles of Incorporation:	a Statutes,	this Florida Profit Co.	<i>rporation</i> adopts the	e following amendment(s) to
A. If amending name, enter the new name of the co	orporatio	<u>ı:</u>		
				The new
name must be distinguishable and contain the wor "Corp.," "Inc.," or Co.," or the designation "Corp word "chartered," "professional association," or the	i Inc."	or "Co". A profession	or "incorporated" onal corporation na	or the abbreviation me must contain the
B. Enter new principal office address, if applicable	<u>e:</u>			
(Principal office uddress MUST BE A STREET ADI	DKESS )			<del></del> _
		<del></del>		
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BC	2 <b>Y</b> )			
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		<del></del>	<del></del>	
			-	
D. If amending the registered agent and/or registe	red office	address in Florida, er	nter the name of th	<u>e</u>
new registered agent and/or the new registered			-	
Name of New Registered Agent				
	(Flor	da street address)		
Vin Brainsand Office Advace			, Florid	a
New Registered Office Address:		(City)	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	(Zip Code)
New Registered Agent's Signature, if changing Re I hereby accept the appointment as registered agent.	gistered A	sgent: iliar with and accept th	he obligations of the	position.
1 nereay accept the appointment as registered agent.	,			•
Sign	nature 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 D	<u>oe</u>	
X Remove	<u>V</u> <u>Mike J</u>	<u>ones</u>	
X Add	<u>SV</u> <u>Sally S</u>	<u>mith</u>	
Type of Action (Check One)	<u>Title</u>	Name	Address
1) Change	Partner	MIRNA VALLE	10715 SW 134 TER
Add Remove			MIami, Fl, 33176
2) Change Add	Partner	MYRNA VALLE (WITH a "Y")	10715 SW 134 TER MICINI, FL, 33176
Remove 3) Change Add			
Remove			
4) Change			
Remove			
Add			
6) Change			
Remove			

	d sheets, if necessary	). (Be specific)				
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<u>r an amengme</u> i	implementing the a	mendment if not	contained in the	amendment itself	:	
neovicions for	licable, indicate N/A)	)	ton <u>umea in inc</u>		-	
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The date of each amendment(s) adoption:date this document was signed.	, if other than the
Free-patricular territoria.	
Effective date <u>if applicable</u> : (no more than 90 days after a	mendment file date)
Note: If the date inserted in this block does not meet the applicable statutory document's effective date on the Department of State's records.	v filing requirements, this date will not be listed as the
Adoption of Amendment(s) (CHECK ONE)	
the amendment(s) was/were adopted by the shareholders. The number of volume by the shareholders was/were sufficient for approval.	otes cast for the amendment(s)
☐ The amendment(s) was/were approved by the shareholders through voting groups the separately provided for each voting group entitled to vote separated.	
"The number of votes cast for the amendment(s) was/were sufficient for	or approval
by(voting group)	···
(voting group)	
The amendment(s) was/were adopted by the board of directors without share action was not required.	cholder action and shareholder
☐ The amendment(s) was/were adopted by the incorporators without sharehold action was not required.	ler action and shareholder
Signature  (By a director, president or other officer – if director selected, by an incorporator – if in the hands of a reappointed fiduciary by that fiduciary)	
EDUARDO OTTENGO	
(Typed or printed name of perso	on signing)
PARTNER.	
(Title of person sign	ning)

. . . .