P1800082142

(F	Requestor's Name)		
(<i>f</i>	Address)		
(A	Address)		
(0	City/State/Zip/Phone #)		
PICK-UP	MAIL MAIL		
(E	Business Entity Name)		
(Document Number)			
Certified Copies	Certificates of Status		
Special Instructions to	o Filing Officer:		





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JAN 0 4 2019 S, YOUNG 16 DEC 20 ANTI: 2

COVER LETTER

TO: Amendment Section Division of Corporations	
NAME OF CORPORATION: PROX.	ander Carp
GOCEMENT NUMBER: P130	100082142
e enclosed Articles of Amendment and fee are si	abmitted for filing.
Preuse return all correspondence concerning this ma	atter to the following:
PROXINA 3150 N Ampano	Name of Contact Person PR CORP Firm/ Company Palm NIRO DR # 802 Address Beach: FL 33069 City/ State and Zip Code CORP & G Mail Com sed for future annual seport notification)
to it admitted concerning this matter, plea	se call:
NESSUR OFEDR	at (<u>561) 577-7028</u> Area Code & Daytime Telephone Number
I nelosed is a check for the following amount made	payable to the Florida Department of State:
\$35 Filing Fee	□\$43.75 Filing Fee & □\$52.50 Filing Fee Certified Copy Certificate of Status (Additional copy is enclosed) (Additional Copy is enclosed)
Mailing Address Amendment Section Division of Corporations P.O. Box 6327	Street Address Amendment Section Division of Corporations Clifton Building

2661 Executive Center Circle Tallahassee, FL 32301

Tallahassee, FL 32314

Articles of Amendment to Articles of Incorporation

of

PROXNICER CORD	
(Name of Corporation as currently	filed with the Florida Dept. of State)
P18000082142	
(Document Number of C	Corporation (if known)
Pursuant to the provisions of section 607,1006. Florida Statutes, this FI its Articles of Incorporation:	orida Profit Corporation adopts the following amendment(s)
A. If amending name, enter the new name of the corporation:	
	The new
name must be distinguishable and contain the word "corporation, "Corp.," "Inc.," or Co.," or the designation "Corp," "Inc," or "Coword "chartered," "professional association," or the abbreviation "P	" "company," or "incorporated" or the abbreviation ". A professional corporation name must contain the
B. Enter new principal office address, if applicable:	
(Principal office address <u>MUST BE A STREET ADDRESS</u>)	
C. Enter new mailing address, if applicable: (Mailing address <u>MAY BE A POST OFFICE BOX</u>)	20 M II: 21
D. If amending the registered agent and/or registered office address	s in Florida, enter the name of the
new registered agent and/or the new registered office address:	
Name of New Registered Agent SPMF AGENT	update Address ONly
(Florida street	address
New Registered Office Address: 3150 N PAIM NI	R DR \$802 Florida 33069 (Zip Code)
Name Danis and America Simultana (Falamaina Danis and America	· porspario exary
New Registered Agent's Signature, if changing Registered Agent: Thereby accept the appointment as registered agent. I am familiar wit	h and accept the obligations of the position
Signature of New Ree	istered 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:

* Much additional sheets, if necessary)

* Case note the officer director title by the first letter of the office title:

President, V Vice President: T= Treasurer; S= Secretary: D= Director: TR= Trustee: C - Chairman or Clerk: CEO - Chief stative Officer. CFO = Chief Financial Officer. If an officer/director holds more than one title, list the first letter of each office V (resident, Treasurer, Director would be PTD.

orges 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 burge. Mike Jones leaves the corporation, Sally Smith is named the V and S. These should be noted as John Doe, PT as a Change, Johns, V as Remove, and Sally Smith, SV as an Add.

Example: <u>X</u> Change	PT John	<u>Doe</u>	
X Remove	<u>V</u> <u>Mike</u>	<u>Jones</u>	
X Add	SV Sally	Smith	
Type of Action (Check One)	<u>Title</u>	Name	<u>Addres</u> s
1) X Change	PI	Kirnnei hat GARCIA	3150 ri Palm Dire Or \$802
Add)	Panfano Beach Fl. 33069
Remove			·
> Change X vdd	<u> 4</u>	NESTOR OJEDA	3150 N PAIM MIKE DR \$800 pompano Beach Fr 33069
RemoveAdd		KIMP CHAT GARCIA	3150 N Palm Dir Dr #80 pen pano Beach FL 330
Remove 4) Change Add Remove	<u>T</u>	NESTOR OJEDA	3150 N Palm Aire Dr #8
5) Change Add Remove			
Change			
Remove			

If amending or adding additional Art Attach additional sheets, if necessary).		 -		
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	i de la companya de	At	at a feta a gama a	
If an amendment provides for an exc provisions for implementing the ame	nange, reciassinc: endment if not co	ition, or canceua ntained in the am	uon or issued snard endment itself:	: <u>S.</u>
(it not applicable, indicate N/A)				
	· · · · · ·			
	·			
	· · · · · · · · · · · · · · · · · · ·			
				

The date of each amendment(s) adoption: 12/15/16 if other this document was signed.	er than the
! Hective date if applicable: \\ \frac{15}{15} \left \\ \\ \\ \\ \\ \\ \\ \\ \\ \\ \\ \\ \\	
Note: If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be lis document's effective date on the Department of State's records.	sted as the
Adoption of Amendment(s) (CHECK ONE)	
The amendment(s) was/were adopted by the shareholders. The number of votes east for the amendment(s) by the shareholders was/were sufficient for approval.	
☐ The amendment(s) was/were approved by the shareholders through voting groups. The following statement must be separately provided 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	
(voting group)	
☐ The amendment(s) was/were adopted by the board of directors without shareholder action and shareholder action was not required.	
Dated 12/15/18	
Signature	
(By a director, president or other officer – if directors or officers have not been	
selected, by an incorporator – if in the hands of a receiver, trustee, or other court appointed fiduciary by that fiduciary)	
(Typed or printed name of person signing)	_
Shpriholder	
(Title of person signing)	-