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(Address)	400319223684			
(City/State/Zip/Phone #)	10/16/1801018010 ★★35.00			
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COVER LETTER

TO: Amendment Section

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Division of Corporations

NAME OF CORPORATION: _____

DOCUMENT NUMBER: P18000082371

The enclosed Articles of Amendment and tee are submitted for filing.

Please return all correspondence concerning this matter to the following:

Yesema Soto

Name of Contact Person

Firm/ Company

3732 Lake Osborne Dr

Address

Lake worth, FL 33461

City/ State and Zip Code

yeseniasoto312@gmail.com

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

For further information concerning this matter, please call:

 Yesenia Soto
 at (
 954
 817-7141

 Name of Contact Person
 Area Code & Daytime Telephone Number

Enclosed is a check for the following amount made payable to the Florida Department of State:

📕 \$35 Filing Fee

Status Certificate of Status

Statistical States (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, FL 32314 Street Address Amendment Section Division of Corporations Clifton Building 2661 Executive Center Circle Tallabassee, FL 32301

Articles of Amendment to Articles of Incorporation of

FILED

Yesenia Capodanno PA

2018 OCT 1 5 PM 12: 21

(Name of Corporation as currently filed with the Florida Dept. of State RETARY OF STATE TALLAHASSEE, FL

P18000082371

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(Document Number of Corporation (if known)

Pursuant to the provisions of section 607.1006, Florida Statutes, this *Florida Profit Corporation* adopts the following amendment(s) to its Articles of Incorporation:

A. It amending name, enter the new name of the corporation:

Yesenia Soto PA

The new name must be distinguishable and contain the word "corporation," "company," or "incorporated" or the abbreviation "Corp.," "Inc." or "Co". A professional corporation name must contain the word "chartered," "professional association," or the abbreviation "P.4."

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 MAY DE A POST OFFICE DOX)

D. If amending the registered agent and/or registered office address in Florida, enter the name of the new registered agent and/or the new registered office address:

·····	
(Florida street address)	
(City)	, Florida(Zip Code
	· · · · · · · · · · · · · · · · · · ·

New Registered Agent's Signature, if changing Registered Agent:

1 hereby accept the appointment as registered agent. 1 am familiar with and accept the obligations of the position.

Signature of New Registered Agent, if changing

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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 = Viec President; T = Treasurer; S = Scoretary; D = Director; TD = Trustec; 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	<u> </u>	John Doe	
X Rensove	<u>v</u>	wine jones	
<u>X</u> Add	<u>sv</u>	Sally Smith	
Type of Action (Check One)	<u>Title</u>	Name	Address
I) Change		<u> </u>	
Add			
Remove			
2) Change			
Add			
Remove			
3) Change	<u> </u>	<u> </u>	
Add			
Remove			
4) Change	<u> </u>		
Add			·····
Remove			
5) Change			
Add			
Remove			
6) Change			
Add			

E. If amending or adding additional Articles, enter change(s) here:

(Attach additional sheets, if necessary). (Be specific)

F: <u>if an amendment provides for an exchange, reclassification, or cancellation of issued shares,</u> <u>provisions for implementing the amendment if not contained in the amendment itself:</u> (*if not applicable, indicate N/A*)

The date of each amendment(s) adoption: ______, if other than the date this document was signed.

Effective date if applicable: _

(no more than 90 days after amendment file date)

Note: If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as the document's effective date on the Department of State's records.

Adoption of Amendment(s) (CHECK ONE)

The amendment(s) was/were adopted by the shareholders. The number of votes cast 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 east 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.

The amendment(s) was/were adopted by the incorporators without shareholder action and shareholder action was not required.

10/2/18 Dated	
signature (1200mia Soto	
(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)	

Yesenia Soto

(Typed or printed name of person signing)

President

(Title of person signing)