Note: Please print this page and use it as a cover sheet. Type the fax audit number (shown below) on the top and bottom of all pages of the document.

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	so will generate another cover sheet.	
To:	Division of Corporations Fax Number : (850)617-6380	1-2 =
From:	Account Name : LAZARUS CORPORATE FILING SERVICE, INC. Account Number : 120000000019 Phone : (305)552-5973 Fax Number : (305)675-5944	1:0

\*\*Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please.\*\*

Email	Address:		 	

## COR AMND/RESTATE/CORRECT OR O/D RESIGN BOSHIER TAMPA CORP

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## Articles of Amendment Articles of Incorporation

BOSHIER TAMPA CORP	<u></u> ,
(Name of Corporation	on as currently filed with the Florida Dept. of State)
P18000084769	•
(Docum	ent 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) t
A. If amending name, enter the new name of the co	rporation:
	The new
name must be distinguishable and contain the word "Corp.," "Inc.," or Co.," or the designation "Corp, word "chartered," "professional association," or the	d "corporation," "company," or "incorporated" or the abbreviation ""Inc," or "Co". A professional corporation name must contain the
B. Enter new principal office address, if applicable	
(Principal office address MUST BE A STREET ADD	RESS)
	28 0
C. Enter new mailing address, if applicable:	
(Mailing address MAY BE A POST OFFICE BO	<u> </u>
	<u></u>
	The state of the same of the
D. If amending the registered agent and/or register new registered agent and/or the new registered	
Name of New Registered Agent	-
	(Florida street address)
New Registered Office Address:	(Ciry) , Florida (Zip Code)
New Registered Agent's Signature, If changing Reg	istered Agent: I am familiar with and accept the obligations of the position.
I hereby accept the appointment as registered agent.	Tam familiar with and accept the obligations of the positions
Sign	valure 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	<u>PT</u>	John Doc	
X Remove	<u>v</u>	Mike Jones	
X Add	<u>sv</u>	Sally Smith	
Type of Action (Check One)	<u>Title</u>	<u>Name</u>	<u>Addres</u> s
1) Change	VP	CARLOS ANDREA PIATTINI	2841 NE 163 ST APT 201
X Add			NORTH MIAMI BEACH FL 33160
Remove			
2) Change			
Add			
Remove			
3) Change			
Add			
Remove			
4)			•
4) Change			
Add			
Remove			
5) Change			
Add			
Remove			
6) Chanas			
6) Change	-		
, Add			
Remove			

(Attach 4	ding or adding additional Articles, enter change(s) here: additional sheets, if necessary). (Be specific)
N/A	
<del></del>	
provis	mendment provides for an exchange, reclassification, or cancellation of issued shares, tions for implementing the amendment if not contained in the amendment itself:  I not applicable, indicate N/A)
N/A	••
	,
	······································
u	

	11/02/2018	, if other than the
The date of each amendment(s) ad late this document was signed.	option:	, ii odici dian qi
Effective date if applicable:		
	(no more than 90 days after amendment file date)	
Note: If the date inserted in this b document's effective date on the De	lock does not meet the applicable statutory filing requirements, this date will partment of State's records.	l not be listed as the
Adoption of Amendment(s)	(CHECK ONE)	
The amendment(s) was/were ado by the shareholders was/were su	pted by the shareholders. The number of votes cast for the amendment(s) fficient for approval.	
☐ The amendment(s) was/were app must be separately provided for	roved by the shareholders through voting groups. The following statement 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)	
	(voting group)	
The amendment(s) was/were add action was not required.	pted by the board of directors without shareholder action and shareholder	
The amendment(s) was/were add action was not required.	pted by the incorporators without shareholder action and shareholder	
11/02/2018	3	
DatedSignature	Rond-Rull	
(By a d	lirector, president or other officer - if directors or officers have not been	
	d, by an incorporator - if in the hands of a receiver, trustee, or other court ted fiduciary by that fiduciary)	
-FF	RICARDO BOFFI	
	(Typed or printed name of person signing)	
	PRESIDENT	
	(Title of person signing)	