P180000 85116

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TO: Amendment Section
Division of Corporations

 $\mathcal{O}_{\mathcal{C}} \to \mathcal{O}_{\mathcal{C}}$

NAME OF CORPORA	TION: VILLA SERENA I	NORTH.INC	
DOCUMENT NUMBER	P-18000085116		
The enclosed Articles of .	Amendment and fee are su	bmitted for filing.	
Please return all correspo	ndence concerning this ma	tter to the following:	
		LISSETTE HIDALGO	
*******		Name of Contact Person	
	V	ILLA SERENA NORTH .IN	С
		Firm/ Company	
		754 NW 22ND COURT	
		Address	
		MIAMI , FLORIDA 33125	
		City/ State and Zip Code	
	ADMIN@	@VILLASERENAGROUP.0	СОМ
	E-mail address: (to be us	sed for future annual report no	otification)
For further information c	oncerning this matter, pleas	se call:	
LISSETTE	HIDALGO	305	905-0039
Name of Contact Person		Area Code	& Daytime Telephone Number
Enclosed is a check for th	ne following amount made	payable to the Florida Departi	ment of State:
S35 Filing Fee	■S43.75 Filing Fee & Certificate of Status	□\$43.75 Filing Fee & Certified Copy (Additional copy is enclosed)	□S52.50 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			ent Section of Corporations

Tallahassee, FL 32301

Articles of Amendment to Articles of Incorporation of

VILLA SERENA NORTH INC

(Name (f Corporation as currently	filed with the Florida Dept. of State)			
	P18000085	116			
	(Document Number of C	Corporation (if known)			
Pursuant to the provisions of section 607, its Articles of Incorporation:	1006, Florida Statutes, this FI	orida Profit Corporation adopts the fo	Howing ame	ndment	t(s) to
A. If amending name, enter the new na	me of the corporation:				
name must be distinguishable and con. "Corp.," "Inc.," or Co.," or the design word "chartered," "professional associa	ation "Corp," "Inc," or "Co	o". A professional corporation name	the abbrevi		
B. Enter new principal office address, (Principal office address MUST BE A S.		N/A			
C. Enter new mailing address, if appli (Mailing address MAY BE A POST of the Mailing address of the May BE applied to the Mailing address of the Mailing address of the Mailing address of the Mailing address, if applied to the Mailing address of	OFFICE BOX) d/or registered office addres	N/A ss in Florida, enter the name of the	SECRE MAC	70 NUL 8 02 1	
Name of New Registered Agent	HILCIAS JIMENEZ		SE EE,	A	
Name of New Regimerea Agent	11547 SW 235TH STREET			1:0	ليسا
	(Florida stree	t address)		~	
New Registered Office Address:	HOMESTE	AD Florida 33	032		
	(C	ity)	(Zip Code)		
New Registered Agent's Signature, if cl I hereby accept the appointment as regist	ered agent. I am familiar with the second se	th and accept the obligations of the pos MLIG gistere Deent, if changing	ition.		

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.

X Change	<u>PT</u> <u>John</u>	n Doe	
X Remove	<u>V</u> <u>Mik</u>	te Jones	
X Add	<u>SV</u> <u>Sall</u>	y Smith	
Type of Action (Check One)	<u>Title</u>	<u>Name</u>	<u>Addres</u> s
1) Change	PT	ROXANA SOLANO	754 NW 22ND CT
Add			MIAMIM FLORIDA 33125
X Remove			
2) Change	PT	HILCIAS JIMENEZ	11547 SW 235TH STREET
X Add			HOMESTEAD FLORIDA 33032
Remove			
3) Change	VP	ROXANA SOLANO	754 NW 22ND CT
Add			MIAMI. FLORIDA 33125
X Remove			
4) Change	VP	HILCIAS JIMENEZ	11547 SW 235TH STREET
X Add			HOMESTEAD FLORIDA 33032
Remove			
5) Change			
Add			·
X Remove			
6) Change		-	
Add			
Remove			

If amending or adding additional Arti Attach additional sheets, if necessary).	(Be specific)
If an amendment provides for an exch provisions for implementing the ame (if not applicable, indicate N/A)	nange, reclassification, or cancellation of issued shares, endment if not contained in the amendment itself:

	06/19/2019
The date of each amendment(s) adop	otion:, if other than the
date this document was signed.	2010
06/19/ Effective date <u>if applicable</u> :	2019
	(no more than 90 days after amendment file date)
Note: If the date inserted in this blocument's effective date on the Depa	ck does not meet the applicable statutory filing requirements, this date will not be listed as the rtment of State's records.
Adoption of Amendment(s)	(<u>CHECK ONE</u>)
The amendment(s) was/were adopt by the shareholders was/were suffi	ed by the shareholders. The number of votes cast for the amendment(s) cient for approval.
	ved by the shareholders through voting groups. The following statement wh voting group entitled to vote separately on the amendment(s):
"The number of votes cast for	the amendment(s) was/were sufficient for approval
hy	(voting group)
	(voting group)
☐ The amendment(s) was/were adopt action was not required.	ed by the board of directors without shareholder action and shareholder
☐ The amendment(s) was/were adopt action was not required.	ed by the incorporators without shareholder action and shareholder
06/19/2019 Dated Signature	Selvas linea.
(By a dire selected,	ctor, president or other officer indirectors or officers have not been by an incorporator – if in the hands of a receiver, trustee, or other court fiduciary by that fiduciary)
	HILCIAS JIMENEZ
_	(Typed or printed name of person signing)
	PRESIDENT le cas leny
	(Title of person signing)