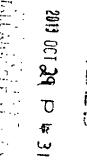
(Red	questor's Name)	
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COVER LETTER

TO: Amendment Section

Division of Corporations

Division of Corporations

Tallahassee, FL 32314

P.O. Box 6327

NAME OF CORPORATION: <u>Eduardo Maies, tive</u> DOCUMENT NUMBER: <u>P180000</u> 86 208	
The enclosed Articles of Amendment and fee are submitted for filing.	
Please return all correspondence concerning this matter to the following: Calvillo Edvardo Mares Name of Contact Person Edvardo Mares, The Firm/ Company 750 (6544 St.). Address Still Bayarea by 1 ds @ amail. Com (E-mail address: (to be used for future annual deport notification)	
For further information concerning this matter, please call:	
Edvardo Caluillo Haas at 727, 504 8169 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 Certificate of Status Certified Copy (Additional copy is enclosed) □ \$43.75 Filing Fee & □ \$52.50 Filing Fee Certified Copy (Additional Copy is enclosed)	
Mailing Address Amendment Section Street Address Amendment Section	

Division of Corporations

2661 Executive Center Circle Tallahassee, FL 32301

Clifton Building

Articles of Amendment

10

Articles of Incorporation

of

Eduardo Mares Ine		20.
P18000086208	filed with the Florida Dept. of	State) OCT 49
(Document Number of C	Corporation (if known)	Washing to
ursuant to the provisions of section 607.1006, Florida Statutes, this F_0 Articles of Incorporation:	<i>lorida Profit Corporation</i> adopt	s the following amendment(s
. If amending name, enter the new name of the corporation:		
ame must be distinguishable and contain the word "corporation, Corp.," "Inc.," or Co.," or the designation "Corp," "Inc," or "C ord "chartered," "professional association," or the abbreviation "P	o". A professional corporation	
. Enter new principal office address, if applicable: Principal office address <u>MUST BE A STREET ADDRESS</u>)		
. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)		
. If amending the registered agent and/or registered office address: Name of New Registered Agent Edvardo		f the
New Registered Office Address	oudo Calvillo	Mares orida
ew Registered Agent's Signature, if changing Registered Agent: hereby accept the appointment as registered agent.—I am familiar wi	th and accept the obligations of	(zip Code) the position.
Eduardo Calvino Signature of New Res	aistant fant Kabanina	

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 Doe
X Remove	<u>V</u>	Mike Jones
X Add	<u>SV</u>	Sally Smith
Type of Action (Check One) 1) Change	Title	Edvardo Calvillo Mares Samo
Add		
Remove		
2) Change		
Add		
Remove		
3) Change		
Add		
Remove		
4) Change		
Add		
Remove		
5) Change		
Add		
Remove		
6) Change		
Add		
Remove		

Attach additional sheets, if necessary).	(Be specific)
	·
	, , , , , , , , , , , , , , , , , , ,
41.	
f an amendment provides for an evel	hange, reclassification, or cancellation of issued shares,
provisions for implementing the ame	endment if not contained in the amendment itself:
(if not applicable, indicate N/A)	
·	

The date of each amendment(s) a	doption: 10/15	13	, if other than the
date this document was signed. Effective date if applicable:	10/15/18		
	(no more than !	90 days after amendment file date)	
Note: If the date inserted in this bedocument's effective date on the De		icable statutory filing requirements,	this date will not be listed as the
Adoption of Amendment(s)	(<u>CHECK ONE</u>)		
he amendment(s) was/were add by the shareholders was/were st	pted by the shareholders. Th flicient for approval.	e number of votes east for the amend	lment(s)
		rough voting groups. The following so vote separately on the amendment(s	
"The number of votes cast	for the amendment(s) was/we		
by	(voling group)		
	(voling group)		
The amendment(s) was/were add action was not required.	pted by the board of directors	s without shareholder action and shar	eholder
The amendment(s) was/were add action was not required.	pted by the incorporators with	hout shareholder action and sharehol	der
Dated	15/18		
(By a d	•	icer – if directors or officers have not	
	l, by an incorporator – if in th ed fiduciary by that fiduciary	ne hands of a receiver, trustee, or other)	er court
	Edvava (Typed or printed	name of person signing)	Mares
	Pre	sident.	
	(Title	of person signing)	

. . . .