P18000089828

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COVER LETTER

TO: Amendment Section Division of Corporations

NAME OF CORPO	RATION: N ESTRADA & A	SSOCIATES INC	
	BER: P18000089828		
	of Amendment and fee are su	bmitted for filing.	
Please return all corre	spondence concerning this ma	tter to the following:	
	TRISHA A ESTRADA		
	-	Name of Contact Perso	on
	N ESTRADA & ASSOCIAT	'ES INC	
		Firm/ Company	
	7778 RAMONA BLVD W	r mile Company	
		Address	
	JACKSONVILLE, FL 32221		
		City/ State and Zip Coo	de
	TRISUTTON@HOTMAIL.C	СОМ	
	E-mail address: (to be us	sed for future annual repor	t notification)
For further information	on concerning this matter, pleas		, 947-4554
Name	of Contact Person	Area Co	947-4554 ode & Daytime Telephone Number
	or the following amount made		
\$35 Filing Fee	□\$43.75 Filing Fee & Certificate of Status	S43.75 Filing Fee & Certified Copy (Additional copy is enclosed)	☐\$52.50 Filing Fee Certificate of Status Certified Copy (Additional Copy is enclosed)
Am Div P.O	iling Address endment Section ision of Corporations . Box 6327 ahassee, FL 32314	Amen Divisi The C 2415	t Address dment Section on of Corporations Lentre of Tallahassee N. Monroe Street, Suite 810 hassee, FL 32303

Articles of Amendment to Articles of Incorporation of

N ESTRADA & ASSOCIATES INC		213 27 min: 25
(<u>Name (</u>	of Corporation as current	tly filed with the Florida Dept. of State)
P18000089828		
	(Document Number	of Corporation (if known)
Pursuant to the provisions of section 607. ts Articles of Incorporation:	1006, Florida Statutes, this	Florida Profit Corporation adopts the following amendment(s) to
A. If amending name, enter the new na	ame of the corporation:	
		The new
name must be distinguishable and contain "Inc" or Co" or the designation "C "chartered," "professional association,"	Corp." "Inc." or "Co".	"company," or "incorporated" or the abbreviation "Corp.," A professional corporation name must contain the word
3. Enter new principal office address.	if applicable:	7778 RAMONA BLVD W
B. Enter new principal office address, if applicable: Principal office address <u>MUST BE A STREET ADDRESS</u>)		JACKSONVILLE, FL 32221
. Enter new mailing address, if applicable: (Mailing address <u>MAY BE A POST OFFICE BOX</u>)		7778 RAMONA BLVÐ W
		JACKSONVILLE. FL 32221
D. If amending the registered agent an new registered agent and/or the new		
Name of New Registered Agent	TRISHA A ESTRADA	_
7778 RAMONA BLVD		W.
	(Florida si	treet address)
New Registered Office Address:	JACKSONVILLE	, Florida 32221
		(City) (Zip Code)
No The state and American Clauses are its	humuima Danistanad Agan	
New Registered Agent's Signature, if c hereby accept the appointment as regist	ered agent. I am familiar	vith and accept the obligations of the position.
	nesta Estra	de
	Signature of New I	Registered Agent, if changing

Check if applicable

☐ The amendment(s) is/are being filed pursuant to s. 607.0120 (11) (e), F.S.

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	$\underline{\mathbf{V}}$	Mike Jones	
X Add	\underline{SV}	Sally Smith	
Type of Action (Check One)	<u>Title</u>	<u>Name</u>	Address
1) Change	<u>V</u>	TRISHA A SUTTON ESTRADA	860 SHERBROOK LN E
Add			JACKSONVILLE, FL 32221
X Remove			
2) Change	V	TRISHA A ESTRADA	7778 RAMONA BLVD W
X Add			JACKSONVILLE, FL 32221
Remove Change			
Add			
Remove			
4) Change			
Add			
Remove			
5) Change		_	
Add			
Remove			
6) Change		_	
Add			
Remove			

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

.

;

N/A	
The date of each amendment(s) adoption:	, if other than the
date this document was signed.	
01/21/2020	
Effective date <u>if applicable</u> : (no more than 90 days after amendment	file date)
Note: If the date inserted in this block does not meet the applicable statutory filing red document's effective date on the Department of State's records.	uirements, this date will not be listed as the
Adoption of Amendment(s) (<u>CHECK ONE</u>)	
The amendment(s) was/were adopted by the incorporators, or board of directors witho action was not required.	ut shareholder action and shareholder
☐ The amendment(s) was/were adopted by the shareholders. The number of votes cast for by the shareholders was/were sufficient for approval.	or the amendment(s)
□ The amendment(s) was/were approved by the shareholders through voting groups. The must be separately provided for each voting group entitled to vote separately on the authorized to refer the number of votes cast for the amendment(s) was/were sufficient for approva	mendment(s):
by	
(voting group)	
01/21/2020 Dated	
Signature Tresta Estrada	
(By a director, president or other officer – if directors or offic selected, by an incorporator – if in the hands of a receiver, tru appointed fiduciary by that fiduciary)	
TRISHA A ESTRADA	
(Typed or printed name of person signing)	
VICE PRESIDENT	
(Title of person signing)	