P18000090651

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COVER LETTER

TO: Amendment Section Division of Corporations

NAME OF CORPORATION: A.F.J. EMPIRE INVESTMENT GROUP, INC.						
DOCUMENT NUMBER:	CUMENT NUMBER: P18000090651					
The enclosed Articles of Amendm	ent and fee are su	bmitted for filing.				
Please return all correspondence c	oncerning this ma	tter to the following:				
		ELIEZER DURAN	Į.			
	Name of Contact Person					
	DURA	AN GROUP & ASSOCIATES, P.A.				
Firm/ Company						
	1001 N FEDERAL HWY, SUITE 355					
	Address					
	НА	LLANDALE BEACH, I	FL 33009			
		City/ State and Zip C	ode			
	INI	FO@DURANGROUPP	A.COM			
E-mail	address: (to be us	sed for future annual rep	ort notification)			
For further information concerning	g this matter, pleas	se call:				
ELIEZER DUF	RAN	at (305-) 900-5515 Code & Daytime Telephone Number			
Name of Contact P	erson	Area (Code & Daytime Telephone Number			
Enclosed is a check for the follow	ing amount made	payable to the Florida D	epartment of State:			
	75 Filing Fee & ficate of Status	S43.75 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		Street Address Amendment Section Division of Corporations The Centre of Tallahassee 2415 N. Monroe Street, Suite 810 Tallahassee, FL 32303				

Articles of Amendment to Articles of Incorporation

A.F.J. EMPIRE INVESTMENT GROUP, INC.

2020 717 28 AM 11: 11

(Name of Corporation as current)	y filed with the Florida Dept. of State)
P180000	990651
(Document Number o	f Corporation (if known)
Pursuant to the provisions of section 607,1006, Florida Statutes, this its Articles of Incorporation:	Florida Profit Corporation adopts the following amendment(s) to
A. If amending name, enter the new name of the corporation:	
	The new
name must be distinguishable and contain the word "corporation," "o "Inc.," or Co.," or the designation "Corp," "Inc," or "Co". A "chartered," "professional association," or the abbreviation "P.A."	A professional corporation name must contain the word
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 BE A POST OFFICE BOX)	
(maining dualess MAT BE A TOST OF TICE BOX)	
D. If amending the registered agent and/or registered office additional and the registered agent agent and the registered agent agen	
new registered agent and/or the new registered office address	<u>:</u>
Name of New Registered Agent	
(Florida str	eet address)
	,
New Registered Office Address:	(City) (Zip Code)
	(zip code)
New Registered Agent's Signature, if changing Registered Agent:	
I hereby accept the appointment as registered agent. I am familiar v	i with and accept the obligations of the position.
// ?c_	_
Signature of New R	egistered Agent, if changing
Check if applicable	
Check if applicable	(a) ES
The amendment(s) is are being fried putsuant to \$, 007,0120 (11) ((c), r _{io} ,

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)

Example:

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	PT	John Do	<u>ne</u>	
X Remove	<u>v</u>	Mike Jo	nes	
X Add	<u>sv</u>	Sally Sn	nith	
Type of Action (Check One)	<u>Title</u>		Name	Address
1) Change	D	_	FRANK SUAREZ	16171 NW 57TH AVENUE
Add				MIAMI LAKES, FL 33014
Kemove				
2) Change		_		
Add				
Remove 3) Change		_		
Add				
Remove				
4) Change		_		
Add				
Remove				
5) Change		_		
Add				
Remove				
6) Change				
Add		_		
Remove				

	ecessary). (Be	e specific)			
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f an amendment provides f provisions for implementing	or an exchange	<u>e, reclassificatio</u>	n, or cancellation	of issued shares,	
	ate N/A)	ent ii not conta	inca in the amen	Jinene usen.	
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	adoption:	, if other than the
date this document was signed.		
Effective date <u>if applicable</u> :	······································	
	(no more than 90 days after amendmen	t file date)
Note: If the date inserted in this document's effective date on the l	block does not meet the applicable statutory filing redepartment of State's records.	equirements, this date will not be listed as the
Adoption of Amendment(s)	(CHECK ONE)	
■ The amendment(s) was/were a action was not required.	dopted by the incorporators, or board of directors with	out shareholder action and shareholder
☐ The amendment(s) was/were a by the shareholders was/were	dopted by the shareholders. The number of votes cast sufficient for approval.	for the amendment(s)
	oproved by the shareholders through voting groups. T or each voting group entitled to vote separately on the	
"The number of votes ca	st for the amendment(s) was/were sufficient for approv	val
by		
	(voting group)	
AUGUS Dated	T 24, 2020	
Signature	; t/	
(By a selec	director, president or other officer – if directors or offi ed, by an incorporator – if in the hands of a receiver, t nted fiduciary by that fiduciary)	
	ALAIN DELGADO HERREF	и
	(Typed or printed name of person signing	5)
	GENERAL MANAGER / DIRECTO	₹
	(Title of person signing)	