P18000090687

Office Use Only



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SEP 0 3 2019

S. YOUNG

COVER LETTER

TO: Amendment Section Division of Corporations

NAME OF CORPORATION: CD LOS RO	bles Inc.			
DOCUMENT NUMBER: 1800009068				
The enclosed Articles of Amendment and fee are su				
Please return all correspondence concerning this ma	tter to the following:			
Eduardo Coello				
	Name of Contact Person			
	Firm/ Company			
7641 Sugar Be	nd Dr.			
	Address			
Orlando, Florid	Orlando, Florida 32819			
	City/ State and Zip Code			
coello1102@gi	mail.com			
É-mail address: (to be us	sed for future annual report notification)			
For further information concerning this matter, pleas	se call:			
Paola Cardenas	at (321)284-9341			
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:			
S35 Filing Fee □S43.75 Filing Fee & Certificate of Status	□S43.75 Filing Fee & □S52.50 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 Clifton Building 2661 Executive Center Circle Tallahassee, FL 32301			

Articles of Amendment to Articles of Incorporation of

CD Los Robles Inc.	
(Name of Corporation as currently	filed with the Florida Dept. of State)
18000090687	
(Document Number of	Corporation (if known)
Pursuant to the provisions of section 607.1006, Florida Statutes, this I its Articles of Incorporation:	Florida Profit Corporation adopts the following amendment(s)
A. If amending name, enter the new name of the corporation:	
name must be distinguishable and contain the word "corporation "Corp.," "Inc.," or Co.," or the designation "Corp." "Inc," or "Gword "chartered," "professional association," or the abbreviation "I	Co". A professional corporation name must contain the
B. Enter new principal office address, if applicable:	
(Principal office address <u>MUST BE A STREET ADDRESS</u>)	<u> </u>
	三
	Ø N F
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)	2 E I
(Making duaress MAT BE A FOST OFFICE BOX)	
	<u></u>
D. If amending the registered agent and/or registered office addr	ess in Florida, enter the name of the
new registered agent and/or the new registered office address:	
Name of New Registered Agent	
(Florida stre	ret address)
Vin a Paraintenant Office (Albanos	. Florida
New Registered Office Address:	(City) (Zip Code)
New Registered Agent's Signature, if changing Registered Agent: I hereby accept the appointment as registered agent. I am familiar w	
Thereby decept the appointment as registered agent. I am jumatar w	and decept the oungations of the position.
Signature of New Re	egistered 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	PT John	<u>Doe</u>	
X Remove	<u>V</u> <u>Mike</u>	<u>Jones</u>	
<u>X</u> Add	<u>SV</u> <u>Sally</u>	<u>Smith</u>	
Type of Action (Check One)	<u>Title</u>	Name	<u>Addres</u> s
1) Change	<u>P</u>	Adan J. Rincon	
AddX_ Remove			
2) Change	<u> </u>	Franklin J. Araujo	Ave. 13A con calle 58
X_ Add			No. 13-19, Urb Ricaurte
Remove			Maracaibo, ZU 4002 VE
3) Change			
Add			
Remove			
4) Change			
Add			
Remove			
5) Change			
Add			
Remove			
6) Change			
Add			
Remove			

Attach additional sheets, if nece.	nal Articles, enter ch ssary). (Be specific,)		
		 		
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f an amendment provides for	an exchange, reclass	<u>ification, or cancella</u>	tion of issued shares	<u>.</u>
provisions for implementing t (if not applicable, indicate	he amendment if not	t contained in the am	endment itself:	
(у погаррнейоге, такие	WA)			
	-			
		_ <u></u>		
				
				
				
				

The date of each amendment(s) adoptio	n:08-01-2019	, if other than the
date this document was signed.		
Effective date <u>if applicable</u> :		
	(no more than 90 days after amendment	file date)
Note: If the date inserted in this block of document's effective date on the Department	oes not meet the applicable statutory filing recent of State's records.	quirements, this date will not be listed as the
Adoption of Amendment(s)	(<u>CHECK ONE</u>)	
☑ The amendment(s) was/were adopted by the shareholders was/were sufficien	y the shareholders. The number of votes east for approval.	or the amendment(s)
	by the shareholders through voting groups. The oting group entitled to vote separately on the a	
"The number of votes east for the	amendment(s) was/were sufficient for approva	I
by		
	(voting group)	
☐ The amendment(s) was/were adopted by action was not required.	y the board of directors without shareholder act	cion and shareholder
☐ The amendment(s) was/were adopted be action was not required.	y the incorporators without shareholder action a	and shareholder
Dated <u>08-15-201</u> Signature	2>	
	president or other officer - if directors or officer	
	n incorporator – if in the hands of a receiver, truciary by that fiduciary)	usice, or other court
	Eduardo J. Coello	
	(Typed or printed name of person signing)	
	Vice President	
	(Title of person signing)	