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APR 3 0 2019
S. YOUNG

COVER LETTER

TO: Amendment Section
Division of Corporations

. . .

NAME OF CORPORATION: JUAN PABL	O RIVAS BLANCO PA			
DOCUMENT NUMBER: P18000094416				
The enclosed Articles of Amendment and fee a	are submitted for filing.			
Please return all correspondence concerning the	is matter to the following:			
RAYONDA WILLIAM	1S			
	Name of Contact Person			
PERFECT CIRCLE GR	СОР			
	Firm/ Company			
1221 BRICKELL AVE,	, SUITE 900			
	Address			
MIAMI, FL 33131				
	City/ State and Zip Code			
RW@PERFCIRCLEWW.CO	М			
E-mail address: (to	be used for future annual report notification)			
For further information concerning this matter,	please call:			
RAYONDA WILLIAMS	at (305) 995-8255 Area Code & Daytime Telephone Number			
Name of Contact Person	Area Code & Daytime Telephone Number			
Enclosed is a check for the following amount m	ade payable to the Florida Department of State:			
■ \$35 Filing Fee □\$43.75 Filing Fee Certificate of State				
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

JUAN PABLO RIVAS BLANCO PA

(Name of Corporation as cu	rrently filed with the Florida Dept. of State)
P18000094416	
(Document Nur	nber of Corporation (if known)
Pursuant to the provisions of section 607.1006, Florida Statute its Articles of Incorporation:	s, this Florida Profit Corporation adopts the following amendment(s) to
A. If amending name, enter the new name of the corporation	on:
name must be distinguishable and contain the word "corp "Corp.," "Inc.," or Co.," or the designation "Corp," "Inc, word "chartered," "professional association," or the abbrevio	The new poration," "company," or "incorporated" or the abbreviation or "Co". A professional corporation name must contain the action "P.A."
B. Enter new principal office address, if applicable: (Principal office address MUST BE A STREET ADDRESS)	
	9
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)	APR 22
	PE 6: 5
 If amending the registered agent and/or registered office new registered agent and/or the new registered office ac 	e address in Florida, enter the name of the
Name of New Registered Agent	
(Flor	ida street address)
New Registered Office Address:	. Florida
	(City) (Zip Code)
New Registered Agent's Signature, if changing Registered A hereby accept the appointment as registered agent. I am fam	Agent: niliar with and accept the obligations of the position.
Signature of a	New Registered 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	<u>РТ</u>	John Doe	
X Remove	<u>V</u>	Mike Jones	
_X Add	<u>sv</u>	Sally Smith	
Type of Action (Check One)	<u>Title</u>	Name	<u>Addres</u> s
1) Change	S	CYNTHIA ANDRADE	5550 GLADES ROAD
Add			SUITE 200
X Remove			BOCA RATON, FL 33431
2) Change	S	RAYONDA WILLIAMS	1221 BRICKELL AVE
X Add			SUITE 900
Remove			MIAMI, FL 33131
3) Change			
Add			
Remove			
4) Change		-	
Add			
Remove			
5) Change			
Add	- · -		
Remove			
6) Change			
Add			
Remove			

-	ticles, enter change(s) here: (Be specific)	
	-	
f an amendment provides for an exch	hange, reclassification, or cancellation of issued shares,	
f an amendment provides for an exch provisions for implementing the amer (if not applicable, indicate N/A)	hange, reclassification, or cancellation of issued shares, endment if not contained in the amendment itself:	
<u>provisions for implementing the amer</u>	hange, reclassification, or cancellation of issued shares, and ment if not contained in the amendment itself:	
<u>provisions for implementing the amer</u>	hange, reclassification, or cancellation of issued shares, endment if not contained in the amendment itself:	
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provisions for implementing the amer	hange, reclassification, or cancellation of issued shares, endment if not contained in the amendment itself:	

The date of each amendment(s) adoption: date this document was signed.		, if other than the
· ·		
Effective date <u>if applicable</u> :	(no more than 90 days after amendment file date)	
document's effective date on the Department of Sta	meet the applicable statutory filing requirements, this date wi ate's records.	Il not be listed as the
Adoption of Amendment(s) (CHEC	CK ONE)	
☐ The amendment(s) was/were adopted by the sha by the shareholders was/were sufficient for app	areholders. The number of votes cast for the amendment(s) proval.	
☐ The amendment(s) was/were approved by the sh must be separately provided for each voting gre	hareholders through voting groups. The following statement oup entitled to vote separately on the amendment(s):	
"The number of votes cast for the amendr	nent(s) was/were sufficient for approval	
by		
(voting	g group)	
The amendment(s) was/were adopted by the boa action was not required.	ard of directors without shareholder action and shareholder	
☐ The amendment(s) was/were adopted by the incoaction was not required.	orporators without shareholder action and shareholder	
04/17/2019 Dated		
Signature (William)	z Cinduale	
(By a director, presider selected, by an incorpo appointed fiduciary by	nt or other officer – if directors or officers have not been orator – if in the hands of a receiver, trustee, or other court that fiduciary)	
CYNTHIA AN	NDRADE	
(Тур	ped or printed name of person signing)	
SECRETARY		
	(Title of person signing)	