Division of Corporations

Florida Department of State

Division of Corporations Electronic Filing Cover Sheet

Note: Please print this page and use it as a cover sheet. Type the fax audit number (shown below) on the top and bottom of all pages of the document.

(((H23000401882 3)))



H230004018823ABC

Note: DO NOT hit the REFRESH/RELOAD button on your browser from this page. Doing so will generate another cover sheet.

To:

Division of Corporations

Fax Number : (850)617-6380

From:

Account Name : EXPRESS CORPORATE FILING SERVICE INC.

Account Number : I20000000146 Phone : (305)444-4994 Fax Number : (305)328-4774

Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please.

Email Address:__

COR AMND/RESTATE/CORRECT OR O/D RESIGN AVA GROUP I CORP

Certificate of Status	0
Certified Copy	0
Page Count	05
Estimated Charge	\$35.00

Electronic Filing Menu

Corporate Filing Menu

Help



.: _____ Paga: 4 :

Articles of Amendment to Articles of Incorporation of

18000094928	у сограния аз сите	itly filed with the Florida De	pre or state)	
	(Document Number	of Corporation (if known)		
ursuant to the provisions of section 607. s Articles of Incorporation:	1006, Florida Statutes, the	s Florida Profit Corporation	adopts the following ame	ndment(s)
If amending name, enter the new na	ame of the corporation:			
			The	new
ame must be distinguishable and contain Inc.," or Co.," or the designation "C chartered," "professional association,"	Corp," "Inc," or "Co".	A professional corporation	l" or the abbreviation "Co name must contain the	rp.," word
B. Enter new principal office address, if applicable: (Principal office address <u>MUST BE A STREET ADDRESS</u>)		709 ALTON ROAD		
		SECOND FLOOR		
		MIAMI BEACH, FL 33	MIAMI BEACH, FL 33139	
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)		709 ALTON ROAD		
		SECOND FLOOR		
		MIAMI BEACH, FL 33	139	·····
. If amending the registered agent an new registered agent and/or the nev			ame of the	— <u>13</u>
Name of New Registered Agent	CHANGE OF ADDRES	S		ĒΩ
	709 ALTON ROAD SEC	COND FLOOR		<u>:</u> .
	(Florida :	street address)		
New Registered Office Address:	MIAMI BEACH		, Florida	
		(City)	(Zip Code)	
ew Registered Agent's Signature, if c	hanging Registered Age	nt:		
hereby accept the appointment as regist	ered agent. I um familia	r with and accept the obligation	ons of the position.	
	Signature of New	Registered Agent, if changing	·	

To:

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:

1-4-- 13--

DET.

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:

₹ Change	<u>F1</u>	John Doe	
X Remove	<u>V</u>	Mike Jones	
X Add	<u>sv</u>	Sally Smith	
Type of Action (Check One)	Title	Name	<u>∆ddres</u> s
1) XX Change	P	DAVID SOLIMAN	709 ALTON ROAD
Add			SECOND FLOOR
Remove			MIAMI BEACH, FL 33139
2) Change			 _
Add))
Remove Change			2:
Add			
Remove			
4) Change		 	
Remove			
5) Change			
Add			
Remove			
n Change			
Add			
Remove			

To:

Page: 7 of 7	2023-11-28 15 42:26 GMT	13053284774	From: Yanet Avil
The date of each amendment(s) addate this document was signed.	11/17/2023 option:		_ if other than the
Effective date if applicable:	(no more than 90 days after amend	ment file date)	
Note: If the date inserted in this ble document's effective date on the Dep	ock does not meet the applicable statutory filin		not be listed as the
Adoption of Amendment(s)	(CHECK ONE)		
☐ The amendment(s) was/were adoptaction was not required.	ted by the incorporators, or board of directors v	without shareholder action and s	shareholder
The amendment(s) was/were adop by the shareholders was/were suff	ted by the shareholders. The number of votes clicient for approval.	east for the amendment(s)	
☐ The amendment(s) was/were appr must be separately provided for e	oved by the shareholders through voting groups ach voting group entitled to vote separately on	s. The following statement the amendment(s):	
"The number of votes cast for	or the amendment(s) was/were sufficient for ap	proval	
by	(voting group)	.,,	:
11/17/2023 Dated	<u></u>		_
Signature/e	David Soliman		-
(By a dir selected,	cetor, president or other officer - if directors or by an incorporator - if in the hands of a receive d fiduciary by that fiduciary)		Ďς
1	DAVID SOLIMAN		: :

(Typed or printed name of person signing)

(Title of person signing)

PRESIDENT