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COVER LETTER

TO: Amendment Section

Division of Corporations

Inversiones Full Events & Service, Corp. NAME OF CORPORATION: P18000094938 DOCUMENT NUMBER: _ The enclosed Articles of Amendment and fee are submitted for filing. Please return all correspondence concerning this matter to the following: Wuiston E. Espinoza Name of Contact Person Inversiones Full Events & Service, Corp. Firm/ Company 6900 Tavistock Lakes Blvd, Ste 400 Address Orlando, Florida 32827 City/ State and Zip Code wuiston163@hotmail.com E-mail address: (to be used for future annual report notification) For further information concerning this matter, please call: at (305 815-7005

Area Code & Daytime Telephone Number Wuiston E. Espinoza Name of Contact Person Enclosed is a check for the following amount made payable to the Florida Department of State: \$35 Filing Fee □\$43.75 Filing Fee & □\$43.75 Filing Fee & □\$52.50 Filing Fee Certificate of Status Certified Copy Certificate of Status (Additional copy is Certified Copy enclosed) (Additional Copy is enclosed) **Street Address** Mailing Address Amendment Section Amendment Section Division of Corporations Division of Corporations The Centre of Tallahassee P.O. Box 6327 Tallahassee, FL 32314 2415 N. Monroe Street, Suite 810

Tallahassee, FL 32303

Articles of Amendment

to Articles of Incorporation

of

	P180000	94938 9633 1 1 1 0 D1112+ 2 L	
(Name of Corpo	oration as current	(Iv filed with the Florida Dept. of State)	
	Inversiones Full I	Events & Service, Corp.	
(D	ocument Number	of Corporation (if known)	
Pursuant to the provisions of section 607.1006, Flits Articles of Incorporation:	lorida Statutes, this	Florida Profit Corporation adopts the following amendment(s) to	
A. If amending name, enter the new name of t	he corporation:		
		The new	
name must be distinguishable and contain the wor "Inc.," or Co.," or the designation "Corp," "chartered," "professional association," or the c	Inc." or "Co".	'company," or "incorporated" or the abbreviation "Corp.," A professional corporation name must contain the word "	
R. Enter new principal office address if appli	cable	6900 Tavistock Lakes Blvd, Ste 400	
B. Enter new principal office address, if applicable: (Principal office address MUST BE A STREET ADDRESS)		Orlando, Florida 32827	
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE)	E BOX)	6900 Tavistock Lakes Blvd, Ste 400	
(Mailing dualess MAT BE AT OST OFFICE BOX)		Orlando, Florida 32827	
 If amending the registered agent and/or re- new registered agent and/or the new regist 			
		E. Espinoza	
Name of New Registered Agent	6900 Tavi	stock Lakes Blvd, Ste 400	
		treet address)	
N	Orlando	, Florida 32827	
New Registered Office Address:		(City) (Zip Code)	
New Registered Agent's Signature, if changing I hereby accept the appointment as registered age			
		, , , , , , , , , , , , , , , , , , , ,	
(Dui	ston Eshir	₩ ZO- :- Registered Agent, if changing	
	Signature of 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>PT</u>	John Doe		
X Remove	<u>v</u>	Mike Jones		
X Add	<u>sv</u>	/ Sally Smith		
Type of Action (Check One)	Title	<u>Name</u>	<u>Addres</u> s	
) X Change	VD	Luis Eduardo Salavarria Brizuela	9756 NW 52nd Street, Apt 115	
Add			Miami, Florida 33178	
Remove				
2) Change	PSD	Wuiston E. Espinoza	6900 Tavistock Lakes Blvd, Ste 400	
X Add			Orlando, Florida 32827	
Remove Change				
Add				
Remove				
4) Change				
Add				
Remove				
5) Change				
Add				
Remove				
6) Change				
Add				
Remove				
		Page 2 of 4		
E. If amending or adding additional Articles, enter change(s) here: (Attach additional sheets, if necessary). (Be specific)				

		
		
1.0		*
		
provisions for implementing the amendment if not (if not applicable, indicate N/A)	contained in the amendment itself:	
N/A		
	11.00	
707		
	Page 3 of 4	
Th. d.a C h		if other than th
The date of each amendment(s) adoption:date this document was signed.		n oner man in
12/23/2019		
Effective date if applicable:		
ino more	e than 90 days after amendment file date)	

Note: If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as the document's effective date on the Department of State's records.

Adoption of Amendment(s)	(<u>CHECK ONE</u>)
■ The amendment(s) was/were adop by the shareholders was/were suff	ted by the shareholders. The number of votes cast for the amendment(s) icient for approval.
☐ The amendment(s) was/were appromust be separately provided for ea	oved by the shareholders through voting groups. The following statement ach voting group entitled to vote separately on the amendment(s):
"The number of votes cast fo	or the amendment(s) was/were sufficient for approval
by	
<u> </u>	(voting group)
☐ The amendment(s) was/were adop action was not required.	ted by the board of directors without shareholder action and shareholder
☐ The amendment(s) was/were adoptaction was not required.	ted by the incorporators without shareholder action and shareholder
Dated	
Signature W	iston Esp nota.
(By a dire	ector, president or other officer – if directors or officers have not been by an incorporator – if in the hands of a receiver, trustee, or other court
	d fiduciary by that fiduciary)
	Wuiston E. Espinoza
-	(Typed or printed name of person signing)
	President
(Fitle of person signing)