

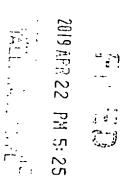
| (Requestor's Name) |
|---|
| |
| (Address) |
| |
| (Address) |
| (Address) |
| |
| (City/State/Zip/Phone #) |
| |
| PICK-UP WAIT MAIL |
| |
| (Business Entity Name) |
| (Business Endty Name) |
| |
| (Document Number) |
| |
| Certified Copies Certificates of Status |
| |
| |
| Special Instructions to Filing Officer: |
| |
| |
| |
| - |
| |
| |
| |
| |

Office Use Only



100327574361

04/22/15--01043--025 ##1845.00



R. WHITE EX 01 2019

...

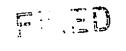
COVER LETTER

TO: Amendment Section Division of Corporations

| NAME OF CORPORA | TION: ALBERTO JAVIE | ER BRAVO TR | ONCOSO F | PA |
|--|---|---|--------------|--|
| DOCUMENT NUMBE | P18000098653 | | | |
| The enclosed Articles of | Amendment and fee are su | ibmitted for filir | ıg. | |
| Please return all correspond | ondence concerning this ma | itter to the follow | ving: | |
| R | AYONDA WILLIAMS | | | |
| | | Name of Co | ntact Person | n |
| P | ERFECT CIRCLE GROP | | | |
| _ | | Firm/ C | ompany | |
| 1 | 221 BRICKELL AVE, SUI | TE 900 | | |
| | | Ado | lress | |
| N | 11AMI, FL 33131 | | | |
| | | City/ State a | nd Zip Cod | e |
| RW@P | ERFCIRCLEWW.COM | | | |
| | E-mail address: (to be us | sed for future ar | nual report | notification) |
| For further information of | concerning this matter, pleas | se call: | | |
| RAYONDA WILLIAMS | | at (| 305 | 995-8255 |
| Name of Contact Person | | | | de & Daytime Telephone Number |
| Enclosed is a check for t | he following amount made | payable to the F | lorida Depa | artment of State: |
| ■ \$35 Filing Fee | □\$43.75 Filing Fee & Certificate of Status | S43.75 Fill Certified C (Additional enclosed) | ору | □\$52.50 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



ALBERTO JAVIER BRAVO TRONCOSO PA

2019 APR 22 PM 5: 25

| AEBERTO JAVIER BIATO TROTCOSOTA | ZUI) KI N C C |
|---|--|
| (Name of Corporatio | n as currently filed with the Florida Dept. of State) |
| P18000098653 | en e |
| (Docume | ent Number of Corporation (if known) |
| Pursuant to the provisions of section 607.1006, Florida ts Articles of Incorporation: | Statutes, this Florida Profit Corporation adopts the following amendment(|
| A. If amending name, enter the new name of the cor | poration: |
| | The new |
| name must be distinguishable and contain the word "Corp.," "Inc.," or Co.," or the designation "Corp," word "chartered," "professional association," or the a | ! "corporation," "company," or "incorporated" or the abbreviation " "Inc," or "Co". A professional corporation name must contain the abbreviation "P.A." |
| B. Enter new principal office address, if applicable: (Principal office address MUST BE A STREET ADDI | |
| | |
| C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX | 0 |
| | |
| D. If amending the registered agent and/or registere new registered agent and/or the new registered o | |
| Name of New Registered Agent | |
| | |
| | (Florida street address) |
| New Registered Office Address: | , Florida |
| | (City) (Zip Code) |
| New Registered Agent's Signature, if changing Regis hereby accept the appointment as registered agent. I | stered Agent: am familiar with and accept the obligations of the position. |
| Signa | ture 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: XChange | <u>PT</u> | John Doe | | |
|-------------------------------|--------------|------------------|----------------------|--|
| X Remove | ¥ | Mike Jones | | |
| $X 	ext{Add}$ | <u>sv</u> | Sally Smith | | |
| Type of Action (Check One) | <u>Title</u> | <u>Name</u> | <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 | | | | |

| | (Be specific) | | | |
|---|--|------------------------|----------------|-------------|
| | | | | |
| | | | | |
| | | | | |
| | | | | |
| | | | | |
| | | | | |
| | | | | |
| , | • | | | |
| | _ | | | |
| | <u>. </u> | | | • |
| | | | | |
| | | | _ | |
| | | | | |
| , , , , , , , , , , , , , , , , , , , | · · · · · · · · · · · · · · · · · · · | | | |
| | | | ···· | |
| | | | | |
| | | | | |
| | | | | |
| | | | | |
| | | | | |
| f an amendment provides for an exc | hange, reclassification. | or cancellation of iss | ued shares, | |
| provisions for implementing the am (if not applicable, indicate N/A) | endment if not contain | ed in the amendment | <u>itselt:</u> | |
| (у посаррпсион, такан МА) | | | | |
| (y noi applicable, malcale IVA) | | | | |
| у погаррисаоте, таксате 1974) | | | | |
| (у погаррисаоте, таксате 1974) | | | | |
| (у погаррисаоте, таксате 1974) | | | | |
| (у погарунсавіє, інаісиїє (УА) | | | | |
| (у погаррисаоте, таксите 1974) | | | | |
| (у погаррисаоте, таксые 1974) | | | | |
| (у пот аррпсате, такие 1974) | | | | |

| The date of each amendment(s) adoption:date this document was signed. | , if other than the |
|---|---|
| <u>-</u> | |
| Effective date <u>if applicable</u> : (no more than 90 days after | amendment file date) |
| Note: If the date inserted in this block does not meet the applicable statuto document's effective date on the Department of State's records. | ry filing requirements, this date will not be listed as the |
| Adoption of Amendment(s) (CHECK ONE) | |
| ☐ The amendment(s) was/were adopted by the shareholders. The number of v by the shareholders was/were sufficient for approval. | votes cast for the amendment(s) |
| ☐ The amendment(s) was/were approved by the shareholders through voting a must be separately provided for each voting group entitled to vote separate | |
| "The number of votes cast for the amendment(s) was/were sufficient | for approval |
| by(voting group) | ,** |
| The amendment(s) was/were adopted by the board of directors without shar action was not required. | reholder action and shareholder |
| The amendment(s) was/were adopted by the incorporators without sharehol action was not required. | der action and shareholder |
| 04/17/2019 | |
| Signature (IMM) (IMM) | |
| (By a director, president or other officer – if directed, by an incorporator – if in the hands of a | |
| appointed fiduciary by that fiduciary) | receiver, trustee, or other court |
| CYNTHIA ANDRADE | |
| (Typed or printed name of pers | on signing) |
| SECRETARY | |
| (Title of person sig | ning) |

.