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## **COVER LETTER**

TO: Amendment Section

P.O. Box 6327

Division of Corporations

Tallahassee, FL 32314

	Division of Corporations
	NAME OF CORPORATION: The Kingdom of BLinds Corp.  DOCUMENT NUMBER: P1800008726
	The enclosed Articles of Amendment and fee are submitted for filing.
	Please return all correspondence concerning this matter to the following:
	ALBA D. Torres  Name of Contact Person  The Kingdom of BLINDS Corp.  Firm/ Company  7825 SW 98+h C+.  Address  Miami FLorida 33173  City/ State and Zip Code  albi 7825 @ gmail. com  E-mail address: (to be used for future annual report notification)
1. Z.	For further information concerning this matter, please call:  ALBA Torres  Name of Contact Person  Enclosed is a check for the following amount made payable to the Florida Department of State:  S35 Filing Fee  S43.75 Filing Fee & S43.75 Filing Fee & S43.75 Filing Fee & Certificate of Status  (Additional copy is enclosed)  S66 - 327 - 92/3 (SPANISH English)  Area Code & Daytime Telephone Number  T  15T. Languag  (Additional Copy is enclosed)
	Mailing Address Amendment Section  Street Address Amendment Section

Division of Corporations

Tallahassee, FL 32301

2661 Executive Center Circle

Clifton Building

## Articles of Amendment to Articles of Incorporation of

(Name of Corporation as currently	filed with the Florida Dept. of State)
The Kingdom of Blinds Cor	D - P180000 8726
(Document Number of	Corporation (if known)
Pursuant to the provisions of section 607.1006, Florida Statutes, this <i>F</i> its Articles of Incorporation:	Torida Profit Corporation adopts the following amendment(s) to
A. If amending name, enter the new name of the corporation:	
- SAME AS BEFORE	The new
name must be distinguishable and contain the word "corporation "Corp.," "Inc.," or Co.," or the designation "Corp," "Inc," or "Coword "chartered," "professional association," or the abbreviation "I	o'. 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> )	7825 SW. 98+h Ct. 7 Miami FL. 33173
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)	SAME 12 PH
D. If amending the registered agent and/or registered office address:  new registered agent and/or the new registered office address:  Al ha D 7	orres (President)
New Registered Office Address: 7825 SW  New Registered Office Address: 7825 SW	et address)
New Registered Agent's Signature, if changing Registered Agent:  I hereby accept the appointment as registered agent. I am familiar w	ith and accept the obligations of the position.
X Hunning of New Re	vgistered Avent, 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)	<u>Title</u>	<u>Name</u>	<u>Addres</u> s
1) _ Change	<del></del> :		
Add 	ρ	Venus Vega	7825 SW 98+hC+ minmi,1
2) Change Add	S	David Rodriguez Sr	7825 SW 98+h Ct. 33173
Remove 3) X Change	Ρ	ALba D. Torres	7825 SW 98 +h Ct. 33173
Add			
4) Change Add			
Remove			
5) Change Add			
Remove			
6) Change Add			
Add			

Attach additional	dding additional Articles, enter change(s) here: sheets, if necessary). (Be specific)
	NONE
<u> </u>	
<del></del>	
f an amendment	t provides for an exchange, reclassification, or cancellation of issued shares,
if not applic	mplementing the amendment if not contained in the amendment itself: cable, indicate N/A)
	- NONE -
<del></del>	

The date of each amendment(s) adoption:	- NONE -	, if other than the
date this document was signed.		
Effective date if applicable:	- NONE -	
(no	o more than 90 days after amendment file date)	
Note: If the date inserted in this block does not m document's effective date on the Department of State		his date will not be listed as the
Adoption Amendment(s) (CHECH	K ONE)	
one amendment(s) was/were adopted by the share by the shareholders was/were sufficient for appro	cholders. The number of votes east for the amenda oval.	nent(s)
☐ The amendment(s) was/were approved by the sha must be separately provided for each voting grou	areholders through voting groups. The following st up entitled to vote separately on the amendment(s)	
"The number of votes east for the amendme		
by	group)	
(voting §	group)	
☐ The amendment(s) was/were adopted by the board action was not required.	d of directors without shareholder action and share	cholder
The amendment(s) was/were adopted by the incoraction was not required.	rporators without shareholder action and sharehold	ler
Dated 11/01/19		
Signature Alle	~{	
(By a director, president	t or other officer – if directors or officers have not rator – if in the hands of a receiver, trustee, or othe that fiduciary)	been r court
<u>Venus</u> <sub>(Typ</sub>	S Vega sed or printed name of person signing)	
	den t (Title of person signing)	
	(Title of person signing)	