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## **COVER LETTER**

TO: Amendment Section Division of Corporations

NAME OF CORPO	ORATION: CUELLAR & SO	N INVESTMENT INC		
	MBER: P19000002056			
	es of Amendment and fee are st		<del></del>	
Please return all core	respondence concerning this ma	atter to the following:		
		Name of Contact Perso	n	
	CUELLAR & SON INVEST	MENT INC		
		Firm/ Company		
	4186 UNIVERSITY BLVD	Š		
		Address	, · <u> </u>	
	JACKSONVILLE, FL 32210	5-4317		
		City/ State and Zip Cod	· ·	
	nellyosorio2002@yahoo.con	1		
	E-mail address: (to be u	sed for future annual report	notification)	
For further informati	on concerning this matter, plea	se call:		2 2
NELY S OSORIO		, 9()4 at (	982 1745 de & Daytime Telephone Number	
Name	e of Contact Person	Area Co	de & Daytime Telephone Number	:.
Enclosed is a check t	for the following amount made	payable to the Florida Dep	artment of State:	. •
S35 Filing Fee	☐\$43.75 Filing Fee & Certificate of Status	S43.75 Filing Fee & Certified Copy (Additional copy is enclosed)	☐\$52.50 Filing Fee Certificate of Status Certified Copy (Additional Copy is enclosed)	FATE
An Div P.C	niling Address nendment Section vision of Corporations D. Box 6327 llahassee, FL 32314	Amend Divisio The Co 2415 N	Address Iment Section In of Corporations Control of Tallahassee N. Monroe Street, Suite 810 Issen, FL 32303	

## Articles of Amendment to Articles of Incorporation of

to

CUELLAR & SON INVESTMENT INC		
(Name of Corporation as curren	tly filed with the Florida Dept. of State)	
P19000002056		
(Document Number	of Corporation (if known)	
Pursuant to the provisions of section 607,1006, Florida Statutes, this its Articles of Incorporation:	s Florida Profit Corporation adopts the following amendment(s	
A. If amending name, enter the new name of the corporation:		
name must be distinguishable and contain the word "corporation." "Inc.," or Co.," or the designation "Corp." "Inc," or "Co", "chartered," "professional association," or the abbreviation "P.A.	A professional corporation name must contain the word	
B. Enter new principal office address, if applicable:	4186 UNIVERSITY BLVD S	
(Principal office address <u>MUST BE A STREET ADDRESS</u> )	JACKSONVILLE, FL 32216-4317	
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)	4186 UNIVERSITY BLVD S	
	JACKSONVILLE, FI. 32216-4317	
D. If amending the registered agent and/or registered office address new registered agent and/or the new registered office address  Name of New Registered Agent		
(Florida st	reet address)	
New Registered Office Address:	Florida	
New Registered Agent's Signature, if changing Registered Agen	(City) (Zip Code) $\frac{\mathbb{T}}{2}$ $\frac{1}{2}$ $1$	
I hereby accept the appointment as registered agent.—I am familiar	with and accept the obligations of the position.	
Signature of New I	Registered Agent, if changing	
Check if applicable  ☐ The amendment(s) is/are being filed pursuant to s. 607.0120 (11)	(e), F.S.	

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	
<u>X</u> Add	<u>SY</u>	Sally Smith	
Type of Action (Check One)	<u>Title</u>	Name	<u>Addręs</u> s
1) X Change	P	NELY S OSORIO	12423 Sea Island Drive
Add			JACKSONVILLE, FL 32225
Remove			
2) Change	P	MaryCarmen Cuellar	10626 Lone Star Rd
Add			JACKSONVILLE, FL 32225
X Remove			
Add			
Remove			
4) Change			
Add			<u></u>
Remove			7.2
5) Change			- (,
Add			
Remove			
6) Change			FAIL
Add			
Remove			

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If amending or adding additional Articles, enter change(s) here: Attach additional sheets, if necessary).— (Be specific)	
	<del></del>
f an amendment provides for an exchange, reclassification, or cancellation of issued shares,	
provisions for implementing the amendment if not contained in the amendment itself:	
(if not applicable, indicate N/A)	
	75
	7A   1.
	_
	TANA MARINA

The date of each amendment(s) ad date this document was signed.	option:	, if other than the
Effective date if applicable:		
	tno more than 90 days after amendment file date)	
<b>Note</b> : If the date inserted in this bl document's effective date on the Dep	ock does not meet the applicable statutory filing requirements, this dapartment of State's records.	ite will not be listed as the
Adoption of Amendment(s)	(CHECK ONE)	
The amendment(s) was/were adopaction was not required.	oted by the incorporators, or board of directors without shareholder action	on and shareholder
☐ The amendment(s) was/were adop by the shareholders was/were suf	nted by the shareholders. The number of votes east for the amendment(ficient for approval.	s)
	roved by the shareholders through voting groups. The following statemental voting group entitled to vote separately on the amendment(s):	ent
"The number of votes east t	or the amendment(s) was/were sufficient for approval	
by	"	
	(voting group)	
selected	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 cour diductary by that fiduciary)	······································
: -	SELY S OSORIO	
,	(Typed or printed name of person signing)  Vice President	123 ¥06
	(Title of person signing)	
		FA \$ 30 E RI E FI