P1900000 3085

(Requestor's Name)	
(Address)	
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(Document Number)	
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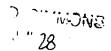
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SECRETARY OF STATE
TALLAHASSEF FLORING



COVER LETTER

TO: Amendment Section
Division of Corporations

NAME OF CORPOR	ATION: ORTEGA ALLIAN	NCE CORP			
DOCUMENT NUMB	P19000003085				
The enclosed Articles of	f Amendment and fee are su	bmitted for filing.			
Please return all corresp	ondence concerning this mat	tter to the following:			
Ş	Sofia Cuenca Ortega				
_		Name of Contact Person	n		
(ORTEGA ALLIANCE CORP				
_		Firm/ Company			
2	258 SW 134TH AVE				
-		Address			
2	MIRAMAR, FL 33027				
		City/ State and Zip Cod	¢		
ancela	ortega@hotmail.co.uk				
		ed for future annual report	notification)		
	4	·-····································	•		
For further information	concerning this matter, pleas	e call:			
SOFIA CUENCA ORT	EGA	at (at Co	348-0213		
Name of	Contact Person	Area Co	de & Daytime Telephone Number		
Enclosed is a check for	the following amount made p	payable to the Florida Depa	artment of State:		
\$35 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)		
Amer Divis P.O. 1	ng Address Idment Section Idment Sec	Ameno Divisio Clifton 2661 E	Address Iment Section on of Corporations Building Executive Center Circle assee, FL 32301		

Articles of Amendment to Articles of Incorporation

of

ORTEGA ALLIANCE CORP			
(Name of Co	orporation as currently file	d with the Florida Dept, of State)	
P19000003085			
	(Document Number of Cor	poration (if known)	
Pursuant to the provisions of section 607.1006 its Articles of Incorporation:	5, Florida Statutes, this Flori	ida Profit Corporation adopts the fol	llowing amendment(s) to
A. If amending name, enter the new name	of the corporation:		
			The new
name must be distinguishable and contain "Corp.," "Inc.," or Co.," or the designation word "chartered," "professional association,	n "Corp," "Inc," or "Co".	A professional corporation name	the abbreviation must contain the
B. Enter new principal office address, if ap			· ·
(Principal office address <u>MUST BE A STRE</u>	ET ADDRESS)		9
C. Enter new mailing address, if applicable (Mailing address MAY BE A POST OFF) D. If amending the registered agent and/or		n Florida, enter the name of the	MIN OF ETATE
new registered agent and/or the new re-			
Name of New Registered Agent SO	FIA CUENCA ORTEGA		
	(Florida street ac	ldress)	
New Registered Office Address:		, Florida	
New Negistated Office Nutress.	(City		(Zip Code)
New Registered Agent's Signature, if change I hereby accept the appointment as registered		and accept the obligations of the posi	ition.

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 Doc	
X Remove	<u>v</u>	Mike Jones	
X Add	<u>sv</u>	Sally Smith	
Type of Action (Check One)	<u>Title</u>	Name	<u>Addres</u> s
1) X Change	P	SOFIA CUENCA ORTEGA	4258 SW 134TH AVE 6
Add			MIRAMAR, FILLIAN
Remove			SSA 6 M
2) Change			10 1 9 9 P
Add			DA ST
Remove			
3) Change			
Add			
Remove			
4) Change			
Add			
Remove			***************************************
5) Change		_	
Add			
Remove			
6) Change	-		
Add			
Remove			

tach additional sheets, if necessary).	(Be specific)				
			<u> </u>	<u>.</u>	
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			_		
an amendment provides for an exchan	nge, reclassificat	ion, or cancel	llation of issue	ed shares,	
rovisions for implementing the amend	lment if not cont	ained in the	imendment its	self:	
(if not applicable, indicate N/A)					
		-		 -	
					
					
				 	

The date of each amendment(s) ac	U1/13/19 Iontion:	, if other than
date this document was signed.	Topicon.	
Effective date if applicable:		
	(no more than 90 days after amendment file date)	
Note: If the date inserted in this bedocument's effective date on the De	lock does not meet the applicable statutory filing requirements, thi partment of State's records.	s date will not be listed as
Adoption of Amendment(s)	(<u>CHECK ONE</u>)	
☐ The amendment(s) was/were add by the shareholders was/were su	opted by the shareholders. The number of votes east for the amendmenticient for approval.	ent(s)
☐ The amendment(s) was/were app must be separately provided for	proved by the shareholders through voting groups. The following state each voting group entitled to vote separately on the amendment(s):	tement
	for the amendment(s) was/were sufficient for approval	经生产
by	(voting group)	5/32 6 M
	(voting group)	Fig. 0
☐ The amendment(s) was/were add action was not required.	opted by the board of directors without shareholder action and shareh	older F. S.
The amendment(s) was/were add action was not required.	opted by the incorporators without shareholder action and shareholde	₹ r
Dated	5)19	
Signature	iregior, president or other officer - if directors or officers have not be	
	d, by an incorporator — if in the hands of a receiver, trustee, or other	
	ted fiduciary by that fiduciary)	
	SOFIA CUENCA ORTEGA	
	(Typed or printed name of person signing)	
	PRESIDENT	
	(Title of person signing)	

the

the