P19000005915

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

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2019 JAN 31 PH 1: 44
SECRETARY OF STATE
OF SAME SECRETORISE

FEB O .) 2019

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•		COVER LETTER		
()		COVER LETTER	*	66
TO: Amendment Secti Division of Corpo			\$ ·	20 20
NAME OF CORPOR	AATION: MAY	isleydis St	ANTANA, INC. 915	See See
DOCUMENT NUME	BER:	19000005	915	037
The enclosed Articles	of Amendment and fee are su	bmitted for filing.		
Please return all corres	pondence concerning this ma	tter to the following:		
	n	lan's leyding s	ANTANA, INC.	
		Name of Contact Perso	n	
	m	ariskeydls Sk	INC.	
	· · · · · · · · · · · · · · · · · · ·	Firm/ Company	/	
	120 Sparr	ow Drive A	PT-103	
	POURL PAIN	n beach, A	334//	
	′ /	City/ State and Zip Cod	e	
	marisk	eydisANTANA	Q VAHOO. COM	
	E-mail address: (to be us	sed for future annual report	notification)	
	concerning this matter, pleas			
mariste	ydis Santana		988-0647	_
Name o	f Contact Person	Area Co	de & Daytime Telephone Number	
Enclosed is a check for	the following amount made	payable to the Florida Depa	artment of State:	
\$35 Filing Fee	\$43.75 Filing Fee & Certificate of Status	\$43.75 Filing Fee & Certified Copy (Additional copy is enclosed)	\$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	Pio
p	Navistendis SANTANA, INC.	The table
(Name of Cor	poration as currently filed with the Florida Dept. of Sta	te)
	019000005915	Strain The
(1	Document Number of Corporation (if known)	635
Pursuant to the provisions of section 607, 1006, is Articles of Incorporation:	Florida Statutes, this Florida Profit Corporation adopts the	e following amendment(s) to
. If amending name, enter the new name of	the corporation:	
	THE STATE OF THE S	
3. Enter new principal office address, if apple Principal office address MUST BE A STREE		
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFIC		
new registered agent and/or the new regis	egistered office address in Florida, enter the name of the stered office address:	<u>e</u>
Name of New Registered Agent		
	(Florida street address)	
New Registered Office Address:	, Florid	a (Zip Code)
hereby accept the appointment as registered a		
	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.

Mike Jones, V as Remove	e, and Sai	ly Smith, SV as an Add.	
Example: X Change	<u>PT</u>	John Doc	
X Remove	<u>V</u>	Mike Jones	
<u>X</u> Add	<u>\$V</u>	Sally Smith	
Type of Action (Check One)	<u>Title</u>	<u>Name</u>	<u>Addres</u> s
1)Change	ρ	marisheydis Smrtana	170 SPANTOW DV. APT-103 POUNT PAIM beach, FC 3341
Add	,	,	APT-103
Remove			Royal PAIM beach, FC 3341
2)Change			
Add			
Remove			
3) Change			
Add			
Remove			
4) Change			
Add			
Remove			
5) Change			
Add			
Remove			
O Cha			
6) Change			
Add			
Remove			

f amending or adding Attach additional shee	ts, if necessary).	(Be specific)				
	 					
						
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f an amendment pro	vides for an excha	inge, reclassifica	ition, or cancel	llation of issued	shares,	
provisions for imple (if not applicable	menting the amen indicate N/A)	ament ii not coi	itained in the a	tmenoment itsei	<u>it:</u>	
(9	,,					
		.				
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The date of each amendment(s) ad	loption: ii	f other than th
late this document was signed.		
Effective date <u>if applicable</u> :		
	(no more than 90 days after amendment file date)	
Note: If the date inserted in this bl	lock does not meet the applicable statutory filing requirements, this date will not	be listed as the
Adoption of Amendment(s)	(CHECK ONE)	
The amendment(s) was/were adopty the shareholders was/were suf	pted by the shareholders. The number of votes cast for the amendment(s) fficient for approval.	
	eroved by the shareholders through voting groups. The following statement each voting group entitled to vote separately on the amendment(s):	
	HIM 22 HAM EXHIP SI were sufficient for approval	
by	(voting group)	
	(voting group)	
The amendment(s) was/were adoption was not required.	pted by the board of directors without shareholder action and shareholder	
The amendment(s) was/were adoption was not required.	pted by the incorporators without shareholder action and shareholder	
Dated	1/28/19	
Signature	GAN	
selected	irector, president or other officer B if directors or officers have not been d, by an incorporator B if in the hands of a receiver, trustee, or other court ed fiduciary by that fiduciary)	
	(Typed or printed name of person signing)	
•		
	ORPSIDENT.	

(Title of person signing)