P19000000437

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COVER LETTER

TO: Amendment Section Division of Corporations

NAME OF CORPO	RATION: KARPEL CPA SE	RVICES INC		
DOCUMENT NUM	BER: P19000006437			
	of Amendment and fee are su	bmitted for filing.		
Please return all corre	spondence concerning this ma	tter to the following:		
	MIGUEL KARPEL			
		Name of Contact Person	1	
		Firm/ Company		
	11098 BISCAYNE BLVD ST	ΓΕ 401		
	<u>-</u>	Address		
	MIAMI, FL 33161			
		City/ State and Zip Code	2	
	MKARPEL@GMAIL.COM			
	E-mail address: (to be us	sed for future annual report	notification)	
For further information	on concerning this matter, pleas	se call:		
MIGUEL KARPEL		at (305		
Name of Contact Person		Area Code & Daytime Telephone Number		
Enclosed is a check for	or the following amount made	payable to the Florida Depa	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)	
Mailing Address Amendment Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314		Street Address Amendment Section Division of Corporations The Centre of Tallahassee 2415 N. Monroe Street, Suite 810		

Tallahassee, FL 32303

Articles of Amendment to Articles of Incorporation of

KARPEL CPA SERVICES INC

(Name	of Corporation as curren	ntly filed with the Florida De	ept. of State)	
P19000006437				
	(Document Number	of Corporation (if known)		
Pursuant to the provisions of section 607 its Articles of Incorporation:	.1006, Florida Statutes, th	is Florida Profit Corporation	adopts the following amend	dment(s) to
A. If amending name, enter the new n	ame of the corporation:			
name must be distinguishable and contain "Inc.," or Co.," or the designation "Contain association,"	Corp," "Inc," or "Co".	A professional corporation		p., "
B. Enter new principal office address, (Principal office address MUST BE A.S.				_
C. Enter new mailing address, if appl (Mailing address MAY BE A POST) D. If amending the registered agent as	<u>OFFICE BOX</u>)	Idress in Florida, enter the r	ame of the	
new registered agent and/or the ne			ame of the	
Name of New Registered Agent	MIGUEL KARPEL			
	4000 TOWERSIDE TEI	R #912		
	(Florida	street address)		
New Registered Office Address:	MIAMI		. Florida 33138	
		(City)	(Zip Code)	_
New Registered Agent's Signature, if c I hereby accept the appointment as regis.	tered agent. I am familia		# 55 X	्व ::
Check if applicable			2. 25.	
☐ The amendment(s) is/are being filed p	oursuant to s. 607,0120 (1)	l) (e), F.S.	J.	

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)	Title	Name	<u>Addres</u> s
1) Change	P	MARIA LEONARDO	3801 HOLLYWOOD BLVD
Add			HOLLYWOOD, FL 33021
X Remove			
2) Change	T	MARIA LEONARDO	3801 HOLLYWOOD BLVD
XAdd			HOLLYWOOD, FL 33021
Remove 3) Change		_	
Add			
Remove			
4) Change	<u></u>	MIGUEL KARPEL	4000 TOWERSIDE TER #912
Add			MIAMI, FL 33138
X Remove			
5) Change	P	MIGUEL KARPEL	4000 TOWERSIDE TER #912
X Add			MIAMI, FL 33138
Remove			
6) Change			
Add			
Remove			

	l sheets, if necessary	i). (Be specific)			
 					
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an amenumer	it provides for an eximplementing the ai	mendment if not	contained in the	amendment itse	snares, lf:
(if not appl	icable, indicate N/A)				<u></u>
			<u></u>		

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The date of each amendment(s) ad	6/17/21 option:	, if other than the
date this document was signed.		
Effective date <u>if applicable</u> :		
	(no more than 90 days af	ier amendment file date)
Note: If the date inserted in this bl document's effective date on the De		utory filing requirements, this date will not be listed as the
Adoption of Amendment(s)	(<u>CHECK ONE</u>)	
☐ The amendment(s) was/were ado action was not required.	nted by the incorporators, or board of	directors without shareholder action and shareholder
■ The amendment(s) was/were ado by the shareholders was/were su	nted by the shareholders. The number ficient for approval.	of votes cast for the amendment(s)
must be separately provided for	roved by the shareholders through vot each voting group entitled to vote sepa	trately on the amendment(s):
"The number of votes east t	or the amendment(s) was/were suffici	ent for approval
by	(voting group)	··
	(voting group)	
6/17/2021 Dated		
Signature	1940	
selected	ector president or other officer – if di , by an incorporator – if in the hands c ed fiduciary by that fiduciary)	
	MIGUEL KARPEL	
-	(Typed or printed name of	person signing)
	0	

(Title of person signing)