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(Business Entity Name)	
(Document Number)	
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COVER LETTER

TO: Amendment Section
Division of Corporations

NAME OF CORPO	RATION: FLORITEX INVE	ESTMENTS LLC	
	BER: P19000008715		
The enclosed Articles	of Amendment and fee are si	ubmitted for filing.	
Please return all corre	spondence concerning this ma	atter to the following:	
	Rudolph M. Di Lascio, Jr., E	sq.	
	 	Name of Contact Perso	n
	Law Office of Rudolph M. E	Di Lascio, Jr., PA	
		Firm/ Company	
	5798 Johnson St	, and Company	
		Address	
	Hollywood, FL 33021		
		City/ State and Zip Cod	c
Florit	exinvestmentsllc12@yahoo.c	om	
		sed for future annual report	notification)
For further information	n concerning this matter, pleas	se call:at (305	763-7891
Name o	of Contact Person	ат (Агеа Со	de & Daytime Telephone Number
Enclosed is a check to	r the following amount made		
S35 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)
Ame Divi P.O.	ling Address ndment Section sion of Corporations Box 6327 chassee, FL 32314	Amend Divisio Clifton 2661 E	Address ment Section of Corporations Building xecutive Center Circle assec, FL 32301

Articles of Amendment to Articles of Incorporation of

FLORITEX INVESTMENTS LLC

(Name of Corporation as currently	iled with the Florida Dept. of State)
P19000008715	
(Document Number of C	orporation (if known)
Pursuant to the provisions of section 607.1006, Florida Statutes, this FI its Articles of Incorporation:	orida Profit Corporation adopts the following amendment(s) to
A. If amending name, enter the new name of the corporation:	
FLORITEX INVESTMENTS, INC.	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 "P.	"company," or "incorporated" or the abbreviation ". A professional corporation name must contain the
B. Enter new principal office address, if applicable: (Principal office address MUST BE A STREET ADDRESS)	
C. Enter new mailing address, if applicable:	29/
(Mailing address <u>MAY BE A POST OFFICE BOX</u>)	
D. If amending the registered agent and/or registered office addres	s in Florida, enter the name of the
new registered agent and/or the new registered office address:	ب ب:
Name of New Registered Agent	30
(Florida stree	address)
New Registered Office Address:	, Florida
(C	ity) (Zip Code)
New Registered Agent's Signature, if changing Registered Agent: I hereby accept the appointment as registered agent. I am familiar with	h and accept the obligations of the position.
Signature of New Reg	istered 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.

X Change	<u>PT</u>	John Do	<u>e</u>	
X Remove	<u>V</u>	Mike Jo	nes	
X Add	<u>sv</u>	Sally Sm	nith	
Type of Action (Check One)	<u>Title</u>		Name	Address
1) Change		_		
Add				
Remove				
2) Change				
Add				
Remove				
3) Change				
Add				
Remove				
4) Change	**	_		
Add				
Remove				
5) Change		_		
Add		_		
Remove				
O. Ch.				
6) Change		-		
Add				
Remove				

If amending or adding additional Arti Attach additional sheets, if necessary).	(Be specific)
	· · · · · · · · · · · · · · · · · · ·
lf an amendment provides for an exch	nange, reclassification, or cancellation of issued shares,
provisions for implementing the ame	ndment if not contained in the amendment itself:
(if not applicable, indicate N/A)	
· · · · · · · · · · · · · · · · · · ·	

The date of each amendment(s) a date this document was signed.	doption:	, if other than the
Effective date if applicable:		
	(no more than 90 days after amendment file date)	
Note: If the date inserted in this document's effective date on the De	plock does not meet the applicable statutory filing requirements, this datepartment of State's records.	te will not be listed as the
Adoption of Amendment(s)	(<u>CHECK ONE</u>)	
■ The amendment(s) was/were ad- by the shareholders was/were su	opted by the shareholders. The number of votes east for the amendment(stifficient for approval.	s)
☐ The amendment(s) was/were approvided for must be separately provided for	proved by the shareholders through voting groups. The following statemed each voting group entitled to vote separately on the amendment(s):	mt
"The number of votes cast	for the amendment(s) was/were sufficient for approval	
by		
	(voting group)	
■ The amendment(s) was/were add action was not required.	opted by the board of directors without shareholder action and shareholde	r
The amendment(s) was/were add action was not required.	opted by the incorporators without shareholder action and shareholder	
October 8,	2019	
Dated	D.Ha.	
Signature		
(By a d selecte	iréctor, president or other officer – if directors or officers have not been d, by an incorporator – if in the hands of a receiver, trustee, or other cour ted fiduciary by that fiduciary)	1
	EDUARDO CHONG	
	(Typed or printed name of person signing)	
	President	
	(Title of person signing)	