## P19000009243

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## COVER LETTER

TO: Amendment Section

Division of Corporations

NAME OF CORPORATION: PENICHE SERVICES CORP DOCUMENT NUMBER: P19000009243 The enclosed Articles of Amendment and fee are submitted for filing. Please return all correspondence concerning this matter to the following: IRMA PENICHE Name of Contact Person Firm/ Company 13385 SW 114 TER Address MIAMI, FL 33186 City/ State and Zip Code sygoservices@yahoo.com E-mail address: (to be used for future annual report notification) For further information concerning this matter, please call: irma peniche Name of Contact Person Enclosed is a check for the following amount made payable to the Florida Department of State: ■ \$35 Filing Fee □\$43.75 Filing Fee & □\$43.75 Filing Fee & □\$52.50 Filing Fee Certificate of Status Certified Copy Certificate of Status (Additional copy is Certified Copy enclosed) (Additional Copy is enclosed) Mailing Address Street Address Amendment Section Amendment Section Division of Corporations Division of Corporations P.O. Box 6327 Clifton Building Tallahassee, FL 32314 2661 Executive Center Circle

Tallahassee, FL 32301

## Articles of Amendment to Articles of Incorporation

of

## PENICHE SERVICES CORP

(Name of Corporation as curre	ntly filed with the Florida Dept	. of State)
P19000009243		
(Document Number	r of Corporation (if known)	
Pursuant to the provisions of section 607,1006, Florida Statutes, thits Articles of Incorporation:	sis Florida Profit Corporation ad	lopts the following amendment(s) to
A. If amending name, enter the new name of the corporation:		
N/A		The new
name must be distinguishable and contain the word "corpora" "Corp.," "Inc.," or Co.," or the designation "Corp," "Inc," or word "chartered," "professional association," or the abbreviation	r "Co". A professional corpora	rated" or the abbreviation
B. Enter new principal office address, if applicable:	N/A	
(Principal office address MUST BE A STREET ADDRESS)	·	
C. Enter new mailing address, if applicable:		19
(Mailing address MAY BE A POST OFFICE BOX)	N/A 	三二二二二十二十二十二十二十二十二十二十二十二十二十二十二十二十二十二十二十二
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		<u> </u>
D. If amending the registered agent and/or registered office ad		ne of the
new registered agent and/or the new registered office addre	ess:	E G
Name of New Registered Agent		
(Florida	street address)	<del></del>
New Registered Office Address:		, Florida
	(City)	(Zip Code)
Non-Basistand America Cincolner (Cabassian Delica de La	-4.	
New Registered Agent's Signature, if changing Registered Age I hereby accept the appointment as registered agent.—I am familia	<u>nt:</u> ir with and accept the obligations	of the position.
	,	, ,
<u> </u>		
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.

X Change	<u>PT</u>	John Doe	
X Remove	<u>Y</u>	Mike Jones	
X Add	<u>sv</u>	Sally Smith	
Type of Action (Check One)	<u>Title</u>	Name	<u>Addres</u> s
1) Change	P	IRMA, PENICHE R	13385 sw 114 ter miai, fl 33186
Add X Remove			
2) Change Add	p	PENICHE, IRMA R	13385 sw 14 terr miami, fl 33186
Remove 3 ) Change Add Remove	vp	PEREZ BOLANOZ, PEDRO	13385 sw 14 terr miami, fl 33186
4) Change Add Remove	VP	PEREZ BOLANOS, PEDRO	13385 sw 14 terr miami, fl 33186
5) Change Add			
Remove 6) Change Add		_	
Remove			

E. If amending or adding additional Articles, enter change(s) here: (Attach additional sheets, if necessary).—(Be specific)	
We are correcting the error in the name of the agent and president	
	-
·	
	<del></del>
F. If 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)	

The date of each amendment(s date this document was signed.	) adoption:	, if other than the
•	02/14/2019	
Effective date if applicable:		
	(no more than 90 days after amendment file date)	
Note: If the date inserted in the document's effective date on the	is block does not meet the applicable statutory filing requirements, this date will no Department of State's records.	ot be listed as the
Adoption of Amendment(s)	( <u>CHECK ONE</u> )	
☐ The amendment(s) was/were by the shareholders was/were	adopted by the shareholders. The number of votes east for the amendment(s) e sufficient for approval.	
	approved by the shareholders through voting groups. The following statement for each voting group entitled to vote separately on the amendment(s):	
	ast for the amendment(s) was/were sufficient for approval	
by	(voting group)	
	(voting group)	
☐ The amendment(s) was/were action was not required.	adopted by the board of directors without shareholder action and shareholder	
The amendment(s) was/were action was not required.	adopted by the incorporators without shareholder action and shareholder	
02/14/20	019	
DatedSignature	* Lul	
(By selc	a director, president or other officer – if directors or officers have not been cted, by an incorporator – if in the hands of a receiver, trustee, or other court ointed fiduciary by that fiduciary)	
	PENICHE, IRMA R	
	(Typed or printed name of person signing)	
	PRESIDENT	
	(Title of person signing)	