P190000 17517

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(Ad	ldress)	
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MAR 23 2019 S. YOUNG 9 MAR 13 PH 4: 23

COVER LETTER

TO: Amendment Section Division of Corporations

NAME OF CORPORATION: CONK	OR CORP			
DOCUMENT NUMBER: P19000017	517			
The enclosed Articles of Amendment a		ed for filing.		
Please return all correspondence concer	ning this matter to	the following:		
ROLANDO ABI	REU			
	N	me of Contact Persor	1	
ABREU AGUIL	AR CORP			
		Firm/ Company		
4707 NW 7TH S	T APT 108			
		Address		
MIAMI, FL 3312	26			
	Ci	ty/ State and Zip Code	2	
ROLANDO52ABREU	@GMAIL.COM			
E-mail addr	ess: (to be used fo	r future annual report	notification)	
For further information concerning this	matter, please cal	:		
ROLANDO ABREU		786 at (804-8236 de & Daytime Telephone Number	
Name of Contact Person		Area Co	de & Daytime Telephone Number	
Enclosed is a check for the following amount made payable to the Florida Department of State:				
S35 Filing Fee S43.75 File Certificate	of Status (43.75 Filing Fee & Certified Copy Additional copy is inclosed)	☐\$52.50 Filing Fee Certificate of Status Certified Copy (Additional Copy is enclosed)	
Mailing Address Amendment Section Division of Corporati P.O. Box 6327 Tallahassee, FL 3231		Amend Divisio Clifton	Address ment Section n of Corporations Building xecutive Center Circle	

Tallahassee, FL 32301

Articles of Amendment to Articles of Incorporation of

CONKOR CORP		
(Name of Corporation as curren	ntly filed with the Florida Dept. of St	tate)
P19000017517		
(Document Number	r of Corporation (if known)	
Pursuant to the provisions of section 607.1006, Florida Statutes, th its Articles of Incorporation:	is Florida Profit Corporation adopts t	he following amendment(s) to
A. If amending name, enter the new name of the corporation:		
ABREU AGUILAR CORP		The new
name must be distinguishable and contain the word "corporate "Corp.," "Inc.," or Co.," or the designation "Corp." "Inc," or word "chartered," "professional association," or the abbreviation	r "Co". A professional corporation i	" or the abbreviation
B. Enter new principal office address, if applicable:	N/A	
(Principal office address <u>MUST BE A STREET ADDRESS</u>)		
		540 19
C. Enter new mailing address, if applicable:	N/A	
(Mailing address <u>MAY BE A POST OFFICE BOX</u>)		
		<u> </u>
		<u> </u>
D. If amending the registered agent and/or registered office ac	lduras in Flouido, satou tho manno of t	23
new registered agent and/or the new registered office addre		<u>ine</u>
N/A Name of New Registered Agent		
(Florida	street address)	
New Registered Office Address:	. Flori	ida
New Registered Office Address.	(City)	(Zip Code)
New Registered Agent's Signature, if changing Registered Age		and the state of
I hereby accept the appointment as registered agent. I am familia	r with and accept the obligations of th	e position.
Signature of New	v 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.

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)	Title	Name	Address
1)Change		N/A	
Add			
Remove			
2) Change			
Add			
Remove			
3) Change			
Add		-	
Remove			
4) Change			
Add			
Remove			
5) Change			
Add			
Remove			
6) Change			
Add		_ 	

E. If amending or adding additional Article (Attach additional sheets, if necessary).	(Be specific)
N/A	
	
	
	
provisions for implementing the ame	hange, reclassification, or cancellation of issued shares, endment if not contained in the amendment itself:
(if not applicable, indicate N/A)	
N/A	

The date of each amendment	03/07/2019 (s) adoption:	, if other than the
date this document was signed		 -
Effective date <u>if applicable</u> :	03/07/2019	
enterit date <u>n applicante</u> .	(no more than 90 days after amendment file date)	
	this block does not meet the applicable statutory filing requirements, this dhe Department of State's records.	ate will not be listed as the
Adoption of Amendment(s)	(<u>CHECK ONE</u>)	
■ The amendment(s) was/wer by the shareholders was/we	re adopted by the shareholders. The number of votes cast for the amendment ere sufficient for approval.	(s)
	re approved by the shareholders through voting groups. The following statened for each voting group entitled to vote separately on the amendment(s):	ient
"The number of votes	s cast for the amendment(s) was/were sufficient for approval	
by	(voting group)	
	(voting group)	
☐ The amendment(s) was/wer action was not required.	re adopted by the board of directors without shareholder action and sharehold	ler
☐ The amendment(s) was/wer action was not required.	re adopted by the incorporators without shareholder action and shareholder	
03/07	/2019	
Dated	56)	
Signature		
	By a director president or other officer – if directors or officers have not beer	 1
	elected, by an incorporator – if in the hands of a receiver, trustee, or other cou	ırt
aj	ppointed fiduciary by that fiduciary)	
	ROLANDO ABREU	
	(Typed or printed name of person signing)	
	PRESIDENT	
	(Title of person signing)	