## P190000 21615

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Amend

JUN 1 0 2019 I ALBRITTON

## COVER LETTER

TO: Amendment Section Division of Corporations	
NAME OF CORPORATION:	S COVP
DOCUMENT NUMBER:	
The enclosed Articles of Amendment and fee are submitted	 for filing. 
Please return all correspondence concerning this matter to th	following:
vis	Delgado
Lula 1	of ContabuPerson  Corp
14359 Mira	mar Pkny #-290
Miramar F	Address 33027
•	State and Zip Code  Yahoo. Com  iture annual report notification)
E-mail address: (to be used for fi	iture annual report notification)
For further information concerning this matter, please call:	
Name of Contact Person	at (305 ) 807 5856  Area Code & Daytime Telephone Number
Enclosed is a check for the following amount made payable	, .
Certificate of Status Ce	3.75 Filing Fee & Section Sect
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 of

(Name of Co	rporation as c	currently filed with the Florida Dept. of State)
Luso Mills	Co	LP P1900002/4/5
	(Document Nu	Number of Corporation (if known)
Pursuant to the provisions of section 607.1006 its Articles of Incorporation:	, Florida Statut	utes, this Florida Profit Corporation adopts the following amendment(s) to
A. If amending name, enter the new name	of the corpora	ation:
		The new
name must be distinguishable and contain "Corp.," "Inc.," or Co.," or the designation word "chartered," "professional association,	"Corp," "Inc	orporation," "company," or "incorporated" or the abbreviation nc," or "Co". A professional corporation name must contain the
B. Enter new principal office address, if ap		
(Principal office address <u>MUST BE A STRE</u>	<u>ei address</u>	<u></u>
		95
C. Enter new mailing address, if applicable (Mailing address MAY BE A POST OFF		2.2
(maining address MAT DEATOST OT	<u>1012 10311</u> 7	-0
		P; IZ:
D. If amending the registered agent and/or new registered agent and/or the new re		ffice address in Florida, enter the name of the e address:
Name of New Registered Agent		
		Florida street address)
New Registered Office Address:		, Florida
		(City) (Zip Code)
New Registered Agent's Signature, if change the appointment as registered	ging Registere Lagent. Lam f	ed Agent: familiar with and accept the obligations of the position.
<del></del>	Signature	of New Registered Agent, if changing

Please note the officer/d			the office titl	e·	
P = President: V = Vice	Presiden	te by the first tetter of to T= Treasurer: S=	Secretary: D	= Director: TR= T	rustee; C = Chairman or Clerk; CEO = Chief
Executive Officer: CFO	= Chief	Financial Officer. II	an officer/di	rector holds more	than one title, list the first letter of each office
held. President, Treasure			1		
Changes should be noted	d in the fo	llowing manner. Cu	rrently John l	Doe is listed as the	PST and Mike Jones is listed as the V. There is
a change Mike Iones le	aves the a	cornoration Sally Sm	ith is named	the V and S. These	should be noted as John Doe, PT as a Change,
Mike Jones, V as Remove					•
Example:	.,	, 5			
X Change	<u>PT</u>	John Doe			
<u>71</u> 0	<del></del>				
X Remove	Y	Mike Jones			
X Add	<u>sv</u>	Sally Smith	1		
Type of Action	Title	Name			<u>Addres</u> s
(Check One)				,	
1) Change	V	Zor	aya )	elgado	14359 Miramar Pkw Ste 290 Miramar, FL 3302
<b>V</b>			•	7	Str 250
_X_ Add					<u> </u>
Remove					Miramar FL 3302
Keniove					
2) Change					
··/ <u> </u>					
Add		•			
			- 1		
Remove					_ <del></del>
			l		
3) Change		<del></del>	<del></del> !		<del></del>
4.13					
Add					<del></del>
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4) Change					
, <u> </u>			_ 1		
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s) Chausa					
5) Change				<del>-</del>	<u> </u>
Add					
Remove					
6) Change			<u> </u>		<del></del>
Add					<del></del>
Remove					
Kemove			ī		

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)

f amending or adding additional Article Attach additional sheets, if necessary). (	(Re specific)	<u>2013 nere.</u>
Attach duditional sneets, if necessary).	De specific)	
		<u> </u>
	<u>-</u>	
<u> </u>	<u> </u>	
	- <del></del>	
<del></del>		·
If an amendment provides for an exchar	nge, reclassific	cation, or cancellation of issued snares,
provisions for implementing the amend (if not applicable, indicate N/A)	iment it not co	ontained in the amendment usen:
(ij not applicable, inalcale NA)		
		•
		1

The date of each amendment(s) adoption: 5/12/19
Effective date if applicable:  (no more than 90 days after amendment file date)
Note: If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as the document's effective date on the Department of State's records.
Adoption of Amendment(s) (CHECK ONE)
The amendment(s) was/were adopted by the shareholders. The number of votes cast for the amendment(s) by the shareholders was/were sufficient for approval.
The amendment(s) was/were approved by the shareholders through voting groups. The following statement must be separately provided for each voting group entitled to vote separately on the amendment(s):
"The number of votes cast for the amendment(s) was/were sufficient for approval  by
The amendment(s) was/were adopted by the board of directors without shareholder action and shareholder action was not required.
The amendment(s) was/were adopted by the incorporators without shareholder action and shareholder action was not required.  Dated  Signature  (By a director, president or other officer – if directors or officers have not been selected, by an incorporator – if in the hands of a receiver, trustee, or other court appointed fiduciary by that fiduciary)
(Typed or printed name of person signing)  President,
(Title of person signing)