P19000 024 435

(Requestor's Name)
(Address)
(Address)
(City/State/Zip/Phone #)
PICK-UP WAIT MAIL
(Business Entity Name)
(Document Number)
Certified Copies Certificates of Status
Special Instructions to Filing Officer:

Office Use Only



500337297785

11/22/19--01021--00 **35.00

2019 NOV 22 PM 1:5

CEC SO SOIR

COVER LETTER

TO: Amendment Section

Division of Corporations

Division of Corporations

Tallahassee, FL 32314

P.O. Box 6327

NAME OF CORPORATION: High End Services inc.				
DOCUMENT NUMBER: <u>P1900024435</u>				
The enclosed Articles of Amendment and fee are submitted for filing.				
Please return all correspondence concerning this matter to the following:				
Clesia De Andrade Dutra. Name of Contact Person				
High End Services inc. Firm/Company				
1301 NW 2nd Circle.				
Boca Raton Florida 33432. City/ State and Zip Code				
E-mail address: (to be used for future annual report notification)				
For further information concerning this matter, please call:				
Clesia Dutra at 561, 305 2760 Name of Contact Person Area Code & Daytime Telephone Number	r			
Enclosed is a check for the following amount made payable to the Florida Department of State:				
\$35 Filing Fee Certificate of Status Same Status				
Mailing Address Amendment Section Street Address Amendment Section				

Division of Corporations

Tallahassee, FL 32301

2661 Executive Center Circle

Clifton Building

Articles of Amendment

to

Articles of Incorporation

of

(. value of Corporatio	on as currently filed with the Flo	n Ma Dept. or State)	
(Docume	ent Number of Corporation (if kn	own)	
	·		
Pursuant to the provisions of section 607,1006, Floridals Articles of Incorporation:	Statules, this Prortae Projet Corp	noration adopts the fol	nowing amenume
A. If amending name, enter the new name of the cor	rporation:		
	· <u> </u>		
ame must be distinguishable and contain the word	l "corporation," "company," o	r "incorporated" or	The new the abbreviation
Corp.," "Inc.," or Co.," or the designation "Corp."	" "Inc," or "Co". A profession	al corporation name	must contain the
ord "chartered," "professional association," or the a	shbreviation "P.A."		2
Enter new principal office address, if applicable:			019
Principal office address <u>MUST BE A STREET ADD</u>	<u>RESS</u>)		
			72
			~~~
Futor now mailing addrace if applicable			<u> </u>
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX		•	
(Mailing address MAY BE A POST OFFICE BOX	<u></u>	•	
	<u> </u>	· · ·	- 54
	<u> </u>	· · · · · · · · · · · · · · · · · · ·	15,
	<u></u>		75.
(Mailing address <u>MAY BE A POST OFFICE BON</u>		er the name of the	
(Mailing address <u>MAY BE A POST OFFICE BON</u>	ed office address in Florida, ent	er the name of the	15:
(Mailing address MAY BE A POST OFFICE BON  D. If amending the registered agent and/or registered new registered agent and/or the new registered of	ed office address in Florida, ent	er the name of the	<u></u>
(Mailing address MAY BE A POST OFFICE BON  D. If amending the registered agent and/or registere	ed office address in Florida, ent	er the name of the	- 15t
(Mailing address MAY BE A POST OFFICE BON  ). If amending the registered agent and/or registered new registered agent and/or the new registered of	ed office address in Florida, ent office address:	er the name of the	
(Mailing address MAY BE A POST OFFICE BON  ). If amending the registered agent and/or registered new registered agent and/or the new registered of	ed office address in Florida, ent	er the name of the	
(Mailing address MAY BE A POST OFFICE BON  ). If amending the registered agent and/or registered new registered agent and/or the new registered of	ed office address in Florida, ent office address:	er the name of the	(Zip Code)

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:

 $P = President; V - Vice President; T \cdot Treasurer; S \cdot Secretary; D \cdot Director; TR = Trustee; C - Chairman or Clerk; CEO = Chief Executive Officer; CFO = Chief Financial Officer. If an officer director holds more than one title, list the first letter of each office held. President, Treasurer, Director would be PTD.$ 

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: <u>X</u> Change	<u>PT</u> <u>Joh</u>	n Doe			
X Remove	<u>V</u> <u>Mil</u>	ke Jones			
X Add	<u>SV</u> <u>Sali</u>	ly Smith			
Type of Action (Check One)	<u>Title</u>	<u>Name</u>		<u>Addres</u> s	
l) Change	VP	Paulo M	Pedersos D	Boca Rato	and
X Add				Boca Rator	n Florida
Remove				33432	
2) Change					
Add					******
Remove					
3 ) Change					
Add					
Remove					
4) Change				<del></del>	
Add					····
Remove					
5) Change					
Add					
Remove					
6) Change					
Add					
Remove					

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

The date of each amendment(s) adoption:	, if other than the
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 wil document's effective date on the Department of State's records.	I not be listed as the
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 east for the amendment(s) was/were sufficient for approval	
by	
(voting group)	
☐ 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.	
Signature	
$A1 \cdot A$	
(Typed or printed name of person signing)	
PRESIDENT	
(Title of person signing)	