## P19 OCCC Z4797

	questor's Name)	
(Add	dress)	
	dress)	
(City	//State/Zip/Phone	e #)
PICK-UP	☐ WAIT	MAIL
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(Doc	cument Number)	
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Amend

DEC 18 ZOTS
I ALBRITTON

## **COVER LETTER**

**FO:** Amendment Section Division of Corporations

NAME OF CORPOR	ATION: NATURAL VIE	W CORPORATION		
DOCUMENT NUMB	ER:P1900002	4797		
The enclosed Articles o	of Amendment and fee are su	bmitted for filing.		
lease return all corresp	pondence concerning this ma	tter to the following:		
	MARTHA MIREYA	CASTRO		
-		Name of Contact Person	<u></u>	
	NATURAL VIEW CORPORATION			
-		Firm/ Company		
	5551 NW 112 AVE. BLDG 18 APT 115			
_		Address	<del></del>	
	MIAMI, FL 33178			
-		City/ State and Zip Cod	e	
	agiraldo.ams@gma	iil.com		
	E-mail address: (to be us	sed for future annual report	notification)	
or further information  MARTHA MIREYA	concerning this matter, please	786	779 7534	
Name of Contact Person		at ( Area Co	de & Daytime Telephone Number	
	the following amount made		·	
\$35 Filing Fee	☐\$43.75 Filing Fee & Certificate of Status	☐S43.75 Filing Fee & Certified Copy (Additional copy is enclosed)	□\$52.50 Filing Fee Certificate of Status Certified Copy (Additional Copy is enclosed)	
Mailing Address			Address	
Amendment Section Division of Corporations		Amendment Section 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

NATURAL VIEW CORPORATION

iled with the Florida Dept. of State)
orporation (if known)
orida Profit Corporation adopts the following amendment(s) to
The newThe newThe new
20 14
FILED  SECRETARIASSEE.F. CORROLA  TALL ARRASSEE.F. CORROLA
s in Florida, enter the name of the
<del></del>
address)
, Florida
(Zip Code)
a and accept the obligations of the position.
istered Agent if changing

amending the Officers and/or Directors, enter the title and name of each officer/director being removed and title, name, and idress of each Officer and/or Director being added:

ttach additional sheets, if necessary)

xample:

'ease note the officer/director title by the first letter of the office title:

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

hanges 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 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. The Jones, V as Remove, and Sally Smith, SV as an Add.

<u>√</u> Change	<u>PT</u>	John Doe		
<u> ⟨ Remove</u>	<u>V</u>	Mike Jones		
<u>√</u> Add	<u>sv</u>	Sally Smith		
ype of Action 'heck One)	Title	Name	Address	
Change	AMBR	AIREEN FLORAL LLC	5551 NW 112 AVE BLDG 18	
Add			APT 115	
X Remove			MIAMI, FL 33178	
Change	AMBR	AGUILAR M. ERMENEGILDO	6344 ORIOLE DRIVE	
Add	-		DALLAS, TX 75209	
X Remove				
Change	VP	VIVIANA GONZALEZ	12490 NW 11 TRAIL	
X Add			MIAMI, FL 33182	
Remove				
Change				
Adđ				
Remove				
Change				
Add				
Remove				
Change				
Add				
Remove				

amending or adding additional Articles, enter change(s) here:
attach additional sheets, if necessary). (Be specific)
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) a late this document was signed.	adoption:	, if other than the
Effective date <u>if applicable</u> :		
	(no more than 90 days after amendment file date)	
Note: If the date inserted in this locument's effective date on the D	block does not meet the applicable statutory filing requirements, this date vepartment of State's records.	vill not be listed as the
Adoption of Amendment(s)	( <u>CHECK ONE</u> )	
☐ The amendment(s) was/were act by the shareholders was/were s	dopted by the shareholders. The number of votes east for the amendment(s) sufficient for approval.	
☐ The amendment(s) was/were apmust be separately provided for	oproved by the shareholders through voting groups. The following statement or each voting group entitled to vote separately on the amendment(s):	
	t for the amendment(s) was/were sufficient for approval	
by	(voting group)	
	(voting group)	
The amendment(s) was/were adaction was not required.	lopted by the board of directors without shareholder action and shareholder	
The amendment(s) was/were adaction was not required.	lopted by the incorporators without shareholder action and shareholder	
SEPTE Dated	EMBER 30/2019	
Signature	Wolvey	
(By a select	director, president or other officer – if directors or officers have not been ed, by an inerprovator – if in the hands of a receiver, trustee, or other court need fiduciary by that fiduciary)	
	MARTHA MIREYA CASTRO	
	(Typed or printed name of person signing)	
	PRESIDENT	
	(Title of person signing)	