P19000024870

(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



900349707249

08/07/20--01/08--022 +#65.00

99: 11:53: 1 - 1 : 5292

Hhund

SEP 24 LOTA

I ALBRITTON

COVER LETTER

TO: Amendment Section Division of Corporations

NAME OF CORP	ORATION: EL SOL JOYERIA	CORP	
	MBER: P19000024870		
The enclosed Articl	es of Amendment and fee are su	bmitted for filing.	
Please return all cor	respondence concerning this ma	tter to the following:	
	MARIA PATRICIA MORA	GARCIA	
		Name of Contact Person	1
	EL SOL JOYERIA CORP		
		Firm/ Company	
	9 SE 1ST AVE		
		Address	
	HIALEAH, FL. 33010		
		City/ State and Zip Cod	2
	MARIAPATRICIAMORA7(@GMAIL.COM	
	E-mail address: (to be us	sed for future annual report	notification)
For further informa	tion concerning this matter, pleas	se call:	
MARIA PATRICIA	A MORA GARCIA	at (,
Nan	ne of Contact Person	Area Co	de & Daytime Telephone Number
Enclosed is a check	for the following amount made	payable to the Florida Depa	artment of State:
S35 Filing Fee	S43.75 Filing Fee & Certificate of Status	S43.75 Filing Fee & Certified Copy (Additional copy is enclosed)	S52.50 Filing Fee Certificate of Status Certified Copy (Additional Copy is enclosed)
A D P	Iailing Address mendment Section ivision of Corporations O. Box 6327 allahassee, FL 32314	Amend Division The Co 2415 N	Address Iment Section on of Corporations entre of Tallahassee N. Monroe Street, Suite 810 ussee, FL 32303

Articles of Amendment Articles of Incorporation

(Name of Corpora	tion as currently filed with the Florida Dept. of State)
P19000024870	
(Doc	ment Number of Corporation (if known)
tursuant to the provisions of section 607.1006, Flor s Articles of Incorporation:	da Statutes, this Florida Profit Corporation adopts the following amendmen
If amending name, enter the new name of the	corporation:
	The new
ame must be distinguishable and contain the word ' Inc.," or Co.," or the designation "Corp," "In chartered," "professional association," or the abb	corporation," "company," or "incorporated" or the abbreviation "Corp.," ," or "Co". A professional corporation name must contain the word reviation "P.A."
Enter new principal office address, if applicat	
Principal office address <u>MUST BE A STREET A</u> l	<u>DRESS</u>)
	2
Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE E	OX)
	1
. If amending the registered agent and/or regis new registered agent and/or the new registere	ered office address in Florida, enter the name of the
Name of New Registered Agent	
	(Florida street address)
New Registered Office Address:	, Florida
	(City) (Zip Code)

I hereby accept the appointment as registered agent. I am familiar with and accept the obligations of the position.

Signature of New Registered Agent, if changing

Check if applicable

☐ The amendment(s) is/are being filed pursuant to s. 607.0120 (11) (e), F.S.

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 Doe	
X Remove	<u>V</u>	Mike Jones	
X Add	<u>sv</u>	Sally Smith	
Type of Action (Check One)	Title	<u>Name</u>	Address
1) Change	P	MARIA P. MORA GARCIA	9 SE IST AVE
X Add			HIALEAH, FL. 33010
Remove			
2) Change	P	ISAAC GOMEZ	9 SE IST AVE
Add			HIALEAH, FL. 33010
X Remove 3) Change	VP	GUSTAVO GOMEZ	9 SE IST AVE
Add			HIALEAH, FL. 33010
X Remove			
4) Change			
Add			
Remove			
5) Change			
Add			
Remove			
6) Change			
Add			
Remove			

If amending or adding additional Arti Attach additional sheets, if necessary).	(Be specific)
	· · · · · · · · · · · · · · · · · · ·
	
If an amendment provides for an eych	range, reclassification, or cancellation of issued shares,
provisions for implementing the ame	ndment if not contained in the amendment itself:
(if not applicable, indicate N/A)	
•	

The date of each amendment(JUNE 1, 2020 s) adoption:	, if other than the
date this document was signed. Effective date if applicable:	JUNE 1, 2020	
	(no more than 90 days after amendment file date)	
	is block does not meet the applicable statutory filing requirements, this date we Department of State's records.	rill not be listed as the
Adoption of Amendment(s)	(<u>CHECK ONE</u>)	
The amendment(s) was/were action was not required.	adopted by the incorporators, or board of directors without shareholder action a	nd shareholder
☐ The amendment(s) was/were by the shareholders was/were	adopted by the shareholders. The number of votes cast 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):	
"The number of votes,	(voting group)	
JUN Dated	E 1, 2020	
(By	a director, president or other officer - if directors or officers have not been ected, by an incorporator - if in the hands of a receiver, trustee, or other court ointed fiduciary by that fiduciary)	
	MARIA P. MORA GARCIA	
	(Typed or printed name of person signing)	
	PRESIDENT	
	(Title of person signing)	