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(Re	equestor's Name)	
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(BC	isiness Entity Nam	e)
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Certified Copies	Certificates	of Status
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Special Instructions to	Filing Officer:	
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10/02/19--01005--011 **30

OCT 1 8 2019 S. YOUNG SECTION OF A MARK

COVER LETTER

TO: Amendment Section Division of Corporations

NAME OF CORPO	RATION: SOUTH BLOCK N	AVARRO SERVIO	CES INC	
DOCUMENT NUM	P10000025805	_ <u>_</u>	- <u>-</u> -	
The enclosed Articles	of Amendment and fee are su	bmitted for filing.		
Please return all corre	spondence concerning this mat	ter to the following:	:	
	ADRIANA N RENTERIA TI	REJO		
		Name of Contact	Person	
	SOUTH BLOCK NAVARRO	SERVICES INC		
		Firm/ Comp	any	
	30332 SW 152 PLACE			
		Address		
	HOMESTEAD, FL 33033			
		City/ State and Z	ip Code	
PRO	NTOCONSULTING@GMAII	L.COM		
	E-mail address: (to be us		l report	notification)
	·			
For further information	on concerning this matter, pleas	se call:		
ADRIANA N RENT	ERIA TREJO	at í	86	759-5043
Name	of Contact Person		Arca Co	de & Daytime Telephone Number
Enclosed is a check f	or the following amount made	payable to the Flori	da Depa	artment of State:
\$35 Filing Fee	☐\$43.75 Filing Fee & Certificate of Status	□\$43.75 Filing I Certified Copy (Additional copenctored)	•	☐\$52.50 Filing Fee Certificate of Status Certified Copy (Additional Copy is enclosed)
Mailing Address Amendment Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314			Amend Division Clifton	Address Iment Section on of Corporations i Building Executive Center Circle

Tallahassee, FL 32301

Articles of Amendment to Articles of Incorporation of

(Name of Corporation as curre	ently filed with the Florida Dept. of State)
(Document Number	er of Corporation (if known)
Pursuant to the provisions of section 607.1006, Florida Statutes, t its Articles of Incorporation:	his Florida Profit Corporation adopts the following amends
A. If amending name, enter the new name of the corporation	<u>:</u>
name must be distinguishable and contain the word "corpora" ("Corp.," "Inc.," or Co.," or the designation "Corp.," "Inc," oword "chartered," "professional association," or the abbreviation	or "Co". A professional corporation name must contain ti
B. Enter new principal office address, if applicable: (Principal office address <u>MUST BE A STREET ADDRESS</u>)	
C. Enter new mailing address, if applicable:	2
(Mailing address MAY BE A POST OFFICE BOX)	6: F
D. If amending the registered agent and/or registered office a new registered agent and/or the new registered office add	
Name of New Registered Agent	
(Florid	a street address)
New Registered Office Address:	(City), Florida (Zip Code)
	(say cons)
New Registered Agent's Signature, if changing Registered Age I hereby accept the appointment as registered agent. I am famil	
	ı
Signature of No.	ew Registered Agent, if changing

If amending the Officers and/or Directors, enter the title and name of each officer/director being removed and title, na 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 Executive Officer; CFO = Chief Financial Officer. If an officer/director holds more than one title, list the first letter of each held. President, Treasurer, Director would be <math>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. I. 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 C Mike Jones, V as Remove, and Sally Smith, SV as an Add.

Example:	ес, апа заі	ly Smith, 45° as an Mad.		
X Change	PT	John Doc		
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	VP	SERGIO NAVARRO	30332 SW 152 PLACE	
X Add			HOMESTEAD, FL 33033	
Add				
Kemove				
2) Change				
Add				
Remove				
3) Change				
Add				
Remove				
A) Channa				
4) Change				
Add				
Remove				
5) Change				
Add				
Remove				
C)				
6) Change				
Add				
Remove				

	nal sheets, if necessary).	ticles, enter change(s (Be specific)			
				· · ·	
					
					
				·	-
					
	nent provides for an exc	change, reclassification	on, or cancellation of	issued shares.	
f an amendn		endment if not conta	ined in the amendme	nt itself:	
provisions fo					
provisions fo	or implementing the amorphicable, indicate N/A)				
provisions fo					
provisions fo			 		
provisions fo					
provisions fo					
provisions fo				· · · · · · · · · · · · · · · · · · ·	
provisions fo					
provisions for					
provisions fo				-	
provisions fo					

The date of each amendment(s' date this document was signed.	adoption:, if other
· ·	/26/2019
Effective date if applicable:	
	(no more than 90 days after amendment file date)
Note: If the date inserted in the document's effective date on the	s block does not meet the applicable statutory filing requirements, this date will not be list Department of State's records.
Adoption of Amendment(s)	(<u>CHECK ONE</u>)
The amendment(s) was/were by the shareholders was/were	adopted by the shareholders. The number of votes cast for the amendment(s) 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 of	ast for the amendment(s) was/were sufficient for approval
by	,"
,	(voting group)
action was not required.	adopted by the board of directors without shareholder action and shareholder adopted by the incorporators without shareholder action and shareholder
Dated	26/19 director, president or other officer – if directors or officers have not been cted, by an incorporator – if in the hands of a receiver, trustee, or other court binted fiduciary by that fiduciary)
	ADRIANA N RENTERIA TREJO
	(Typed or printed name of person signing)
	PRESIDENT
	(Title of person signing)