## P19 000026647

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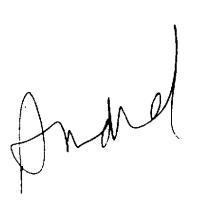
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## **COVER LETTER**

TO: Amendment Sect Division of Corpo						
NAME OF CORPOR	RATION: LPD & CR INC					
DOCUMENT NUMI	P19000026647					
The enclosed Articles	of Amendment and fee are sul	bmitted for filing.				
Please return all corre	spondence concerning this mat	ter to the following:				
	ROLANDO ANTONIO VER	DE ROMERO				
	<del></del>	Name of Contact Person				
	LPD & CR INC	•				
	Firm/ Company					
	7918/7980 NORTH ARMENIA AVENUE					
	Address					
	TAMPA FLORIDA 33604					
		City/ State and Zip Code				
rolan	doverde21@gmail.com					
	E-mail address: (to be us	sed for future annual report	notification)			
	on concerning this matter, pleas		550-4437			
ROLANDO ANTONIO VERDE ROMERO		at (813	_)le & Daytime Telephone Number			
	of Contact Person or the following amount made					
S35 Filing Fee	☐S43.75 Filing Fee & Certificate of Status	☐\$43.75 Filing Fee & Certified Copy (Additional copy is enclosed)	☐\$52.50 Filing Fee Certificate of Status Certified Copy (Additional Copy is enclosed)			

Mailing Address
Amendment Section Division of Corporations P.O. Box 6327

Street Address
Amendment Section Division of Corporations Clifton Building

## Articles of Amendment to Articles of Incorporation of

(Name of Corneration os curro	ntly filed with all file	
(Name of Corporation as curre P19000026647	ntty med with the Flo	rida Dept, of State)
(Document Number	of Corporation (if kno	awn)
ursuant to the provisions of section 607.1006, Florida Statutes, the Articles of Incorporation:	is <i>Florida Profit Corp</i>	oration adopts the following amendment(
. If amending name, enter the new name of the corporation:		
ame must be distinguishable and contain the word "corporat Corp.," "Inc.," or Co.," or the designation "Corp." "Inc," or ord "chartered," "professional association," or the abbreviation	"Co" A professiona	The new "incorporated" or the abbreviation of the corporation name must contain the
. Enter new principal office address, if applicable:	N/A	
Principal office address <u>MUST BE A STREET ADDRESS</u> )		SE 199
Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)	N/A	9 PM 11: #8
If amending the registered agent and/or registered office add new registered agent and/or the new registered office address	dress in Florida, enter	the name of the
Name of New Registered Agent N/A		
N1/A	reet address)	<del>_</del>
New Registered Office Address:	(City)	Florida
	(61)	(Zip Code)
w Registered Agent's Signature, if changing Registered Agent ereby accept the appointment as registered agent. I am familiar	: with and accept the ob	ligations of the position.

## 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.

Mike Jones, V as Reme Example:	ove, and Sally S	Smith, SV as an Add.		
X Change	<u>PT</u> <u>Jo</u>	John Doc		
X Remove	<u>V</u> <u>W</u>	Mike Jones		
X Add	<u>SV</u> <u>S</u>	Sally Smith		
Type of Action (Check One)	Title	<u>Name</u>	<u>Addres</u> s	
I) Change	P	ROLANDO ANTONIO VERDE R	17605 WHISTLING LN	
X Add			LUTZ FL 33549-5604	
Remove				
2) Change	<u>P</u>	SUYAPA MCKENZIE	17605 WHISTLING LN	
Add			LUTZ FL 33549-5604	
X Remove				
3) Change	<u>vp</u>	LUIS D PINEDA	17605 WHISTLING LN	
Add			LUTZ FL 33549-5604	
X Remove				
4) Change				
Add				
Remove				
5) Change				
Add				
Remove				
6) Change				
Add				
Remove				

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nrovisions f	<u>nent provides to</u> or implementing	or an exchange, r g the amendment	t if not containe	or cancenation ( d in the amendn	n issued sitales, ient itself:	
(if not a	pplicable, indica	te N/A)	t ii iiot containe			
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03/25/2019	Control to the state of the
The date of each amendment(s) adoption: date this document was signed.	if other than the
03/25/2019	
Effective date if applicable: (no more than 90 days after amendme	nt file date)
Note: If the date inserted in this block does not meet the applicable statutory filing r document's effective date on the Department of State's records.	equirements, this date will not be listed as the
Adoption of Amendment(s) ( <u>CHECK ONE</u> )	
☐ The amendment(s) was/were adopted by the shareholders. The number of votes cast by the shareholders was/were sufficient for approval.	for the amendment(s)
☐ The amendment(s) was/were approved by the shareholders through voting groups. The must be separately provided for each voting group entitled to vote separately on the	he following statement e amendment(s):
"The number of votes cast for the amendment(s) was/were sufficient for appro-	val
by(voting group)	
(voting group)	
☐ The amendment(s) was/were adopted by the board of directors without shareholder action was not required.	action and shareholder
The amendment(s) was/were adopted by the incorporators without shareholder action action was not required.	n and shareholder
07/11/2019 Dated	
Signature	
Signature  (By a director, president or other officer – if directors or of selected, by an incorporator – if in the hands of a receiver, appointed fiduciary by that fiduciary)	flicers have not been
ROLANDO ANTONIO VERDE ROMERO	
(Typed or printed name of person signi	ng)
PRESIDENT	
(Title of person signing)	