## P190000 27069

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R. WH!TE
JAN 1 3 2020

(019) 10 PH 4: 23

## **COVER LETTER**

**TO:** Amendment Section Division of Corporations

NAME OF CORPO	DRATION: BIRCA 1639 INC.					
	1BER:					
The enclosed Article	es of Amendment and fee are su	bmitted for filing.				
Please return all corr	respondence concerning this ma	tter to the following:				
	IRENE VELEZ					
		Name of Contact Person	n			
	ASI CORPORATE SERVICES					
	Firm/ Company 444 BRICKELL AVENUE #P-41					
	Address					
	MIAMI, FL 33131	11001000				
	-	City/ State and Zip Cod	e			
CO	RPORATE@ASIFO.COM					
	•	sed for future annual report	notification)			
			,			
For further informati	on concerning this matter, pleas	se call:				
IRENE VELEZ		at ( 305	423.0960			
Name	e of Contact Person		)			
:Name	e of Contact Person	Alea 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	□\$43.75 Filing Fee & Certificate of Status	S43.75 Filing Fee & Certified Copy (Additional copy is enclosed)	Certificate of Status			
Mailing Address Amendment Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314		Street Address Amendment Section Division of Corporations Clifton Building 2661 Executive Center Circle Tallahassee, FL 32301				

## Articles of Amendment Articles of Incorporation

of

BIRCA 1639 INC.

2019 DIC 10 PH 4: 23 (Name of Corporation as currently filed with the Florida Dept. of State) P19000027069 (Document Number of Corporation (if known) Pursuant to the provisions of section 607.1006, Florida Statutes, this Florida Profit Corporation adopts the following amendment(s) to its Articles of Incorporation: A. If amending name, enter the new name of the corporation: BIRCA 1250 INC. name must be distinguishable and contain the word "corporation." "company," or "incorporated" or the abbreviation "Corp.," "Inc.," or Co.," or the designation "Corp," "Inc," or "Co". A professional corporation name must contain the word "chartered," "professional association," or the abbreviation "P.A." B. Enter new principal office address, if applicable: (Principal office address MUST BE A STREET ADDRESS ) C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX) D. If amending the registered agent and/or registered office address in Florida, enter the name of the new registered agent and/or the new registered office address: Name of New Registered Agent (Florida street address) New Registered Office Address: (City) (Zip Code) New Registered Agent's Signature, if changing Registered Agent: 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

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:	, unu sai	iy Smun, Sr us un Aud.	
X Change	PT	John Doe	
X Remove	<u>V</u>	Mike Jones	
_X Add	<u>sv</u>	Sally Smith	
Type of Action (Check One)	<u>Title</u>	<u>Name</u>	<u>Addres</u> s
1) Change			
Add			
Remove			
2) Change			
Add			
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3 ) Change			
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4) Change		<del></del>	
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5) Change			
Add			
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6) Change			
Add			
Remove			

	sheets, if necessary).	(Be specific)			
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lf an amendment	provides for an exc	hange, reclassification	on, or cancellation of	issued shares,	
	plementing the amo	endment if not conta	ined in the amendme	nt itself:	
provisions for im					
(if not applied	,				
provisions for im			_		
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The date of each amendment(s) adoption:	, if other than the
date this document was signed.	
Effective date if applicable:	
(no more than 90 days after amendment file date)	
<b>Note:</b> If the date inserted in this block does not meet the applicable statutory filing requirements, th document's effective date on the Department of State's records.	is 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 east for the amendment by the shareholders was/were sufficient for approval.	ent(s)
☐ The amendment(s) was/were approved by the shareholders through voting groups. The following stamust be separately provided for each voting group entitled to vote separately on the amendment(s):	
"The number of votes cast 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 sharehaction was not required.	ıolder
☐ The amendment(s) was/were adopted by the incorporators without shareholder action and shareholde action was not required.	ır
July 1st 2019 Dated	
Signature In MA	
(By a director, president or other officer – if directors or officers have not b selected, by an incorporator – if in the hands of a receiver, trustee, or other appointed fiduciary by that fiduciary)	
IRENE VELEZ	
(Typed or printed name of person signing)	
DIRECTOR	
(Title of person signing)	