

Note: Please print this page and use it as a cover sheet. Type the fax audit number (shown below) on the top and bottom of all pages of the document.

(((H190001118673)))



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To:	Division of Corporations
	Division of Corporations Fax Number : (850)617-6380
From:	
	Account Name : DAKOTA ACCOUNTING SERVICES INC.
	Account Number : I20160000034 Phone : (305)595-1252
	Phone : (305)595-1252
	Phone : (305)595-1252 co Fax Number : (305)255-2729 co
annual	report mailings. Enter only one email address please.**
Email COR	Address:Address:
Email COR	Address: AMND/RESTATE/CORRECT OR O/D RESIGN EL GUAJIRO MONTES DE OCA INC
Email COR	Address: AMND/RESTATE/CORRECT OR O/D RESIGN EL GUAJIRO MONTES DE OCA INC Certificate of Status 1 AMAGO
	Address: AMND/RESTATE/CORRECT OR O/D RESIGN EL GUAJIRO MONTES DE OCA INC Certificate of Status 1 Certified Copy 0
	Address: AMND/RESTATE/CORRECT OR O/D RESIGN EL GUAJIRO MONTES DE OCA INC Certificate of Status Certified Copy Page Count 0 1 0 1 0 1 0 1 0 0 0 0 0 0 0 0 0 0 0 0 0
	Address: AMND/RESTATE/CORRECT OR O/D RESIGN CUS EL GUAJIRO MONTES DE OCA INC Certificate of Status 1 Certified Copy 0 Page Count 01 Estimated Charge \$43.75
Email COR	Address: AMND/RESTATE/CORRECT OR O/D RESIGN EL GUAJIRO MONTES DE OCA INC Certificate of Status Certified Copy Page Count 0 1 0 1 0 1 0 1 0 0 0 0 0 0 0 0 0 0 0 0 0

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COVER LETTER

TO: Amendment Section **Division of Corporations**

NAME OF CORPORATION: _____

DOCUMENT NUMBER: _____

The enclosed Articles of Amendment and fee are submitted for filing.

Please return all correspondence concerning this matter to the following:

JESUS MONTES DE OCA MARTUA

Name of Contact Person

EL GUAJIRO MONTES DE OCA INC

Firm/ Company

1213 SW 131 AVENUE

Address

MIAMI, FL 33184

City/ State and Zip Code

2020TAXDATA@GMAIL.COM

E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

JESUS MONTES DE OCA MARTIJA at (786,298,4825) Area Code & Daytime Telephone Number

Name of Contact Person

Enclosed is a check for the following amount made payable to the Florida Department of State:

S35 Filing Fee

\$43.75 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 Tallahassee, FL 32314

Street Address Amendment Section Division of Corporations Clifton Building 2661 Executive Center Circle Tallahassee, FL 32301

2015/12-4 All 8:59

Articles of Amendment to Articles of Incorporation of

EL GUAJIRO MONTS DE OCA INC

(Name of Corporation as currently filed with the Florida Dept. of State)

P19000027891

(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:

The new 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. <u>Enter new principal office address, if applicable:</u> Principal office address <u>MUST BE A STREET ADDRES</u>	<u> </u>	
C. <u>Enter new mailing address, if applicable:</u> (Mailing address <u>MAY BE A POST OFFICE BOX</u>)		
D. <u>If amending the registered agent and/or registered of</u> <u>new registered agent and/or the new registered office</u> <u>Name of New Registered Agent</u>	flice address in Florida, ent e address:	er the name of the
	Florida street address)	
New Registered Office Address:		, Florida
	(City)	(Zip Code)
New Registered Agent's Signature, if changing Registered hereby accept the appointment as registered agent. I am Signature	td Agent: familiar with and accept the of New Registered Agent, if c	

Page 1 of'4

(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>T9</u> John Doe X Remove <u>v</u> Mike Jones \underline{X} Add SV Sally Smith Type of Action _Title Name Address (Check One) 1) X Change Ρ JESUS MONTES DE OCA MARTIJA __ Add ___ Remove 2) ____ Change __ Add __ Remove 3) ____ Change ____ Add ___ Remove 4) ____ Change ____ Add _ Remove 5) ____ Change Add Remove 6) ____ Change . · _ Add Remove Page 2 of 4

E. <u>If amending or adding additional Articles, enter change(s) here</u>: (Attach additional sheets, if necessary). (Be specific)

. ÷ : : . . ---. : _ ! F. If 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) , ÷ Page 3 of 4

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	04/01/2019		
The date of each amendment(s) a	loption:		, if other than the
date this document was signed.		· · · · · · · · · · · · · · · · · · ·	
	1/2019	:	
Effective date if applicable:		* 	
	(no more than	190 days after amendment file date)	
Note: If the date inserted in this b document's effective date on the De	lock does not meet the app partment of State's records.	plicable statutory filing requirements, this date	will not be listed as the
Adoption of Amendment(s)	(<u>CHECK ONE</u>)		
The amendment(s) was/were add by the shareholders wus/were su	pted by the shareholders. T flicient for approval.	The number of votes cast for the amendment(s)	
The amendment(s) was/were app must be separately provided for	roved by the shareholders the each voting group entitled t	arough voting groups. The following statement to vote separately on the amendment(s):	
"The number of votes cast	for the amendment(s) was/w	vere sufficient for approval	
by		 _ 11	
	(voting group)		
action was not required.		rs without shareholder action and shareholder ithout shareholder action and shareholder	
·······			
04/04/2019			
Dated Signature			
		ficer - if directors or officers have not been	
(Dy autor selected	by an incompartor if in a	the hands of a receiver, trustee, or other court	
appoint	ed fiduciary by that fiduciary	y)	
	IESUS MONTES DE OCA	MARTIJA	
	(Typed or printed	d name of person signing)	
	PRESIDENT		
	(Title	e of person signing)	

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