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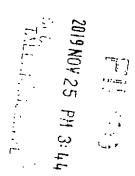
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COVER LETTER

TO: Amendment Section Division of Corporations

NAME OF CORPORA	CASTRO FLORID	A SERVICES, CORP	
DOCUMENT NUMBE	P19000030246		
The enclosed Articles of	A <i>mendment</i> and fee are sul	bmitted for filing.	
Please return all corresp	ondence concerning this ma	uer to the following:	
	JOSE	E AT., ONIO CASTRO AL	.ONSO
_		Name of Contact Person	ו
_		Firm/ Company	
		14263 SW 163RD TER	
_		Address	
		MIAMI, FL 33177	
_		City/ State and Zip Cod	e
		info@traviesoassociates.c	om
	E-mail address: (to be us	sed for future annual report	
For further information JOSE ANTONIO CAS	concerning this matter, please		237-4423
Name of	Contact Person	Area Co	de & Daytime Telephone Number
Enclosed is a check for	the following amount made	payable to the Florida Dep	artment of State:
S35 Filing Fee	☐\$43.75 Filing Fee & Certificate of Status	☐!343.75 Filing Fee & Confified Copy (Additional copy is enclosed)	S52.50 Filing Fee Certificate of Status Certified Copy (Additional Copy is enclosed)
Amer Divis P.O.	ng Address adment Section ion of Corporations Box 6327 hassee, FL 32314	Amend Division The C 2415	Address dment Section on of Corporations fentre of Tallahassee N. Monroe Street, Suite 810 assee, FL 32303

Articles of Amendment to Articles of Incorporation

CASTRO FLORIDA SERVICES, CORP

	tly filed with the Florida Dept. of S 00030446	State)		
	of Corporation (if known)		_	
Pursuant to the provisions of section 607.1006, Florida Statutes, this its Articles of Incorporation:	Florida Profit Corporation adopts	the following	ng amend	ment(s)
A. If amending name, enter the new name of the corporation: FLORIDA BEST SERVICES, CORP.			The n	me.
name must be distinguishable and contain the word "corporation," "Inc.," or Co., or the designation "Corp," "Inc." or "Co", "charterea," "professional association," or the abbreviation "P.A.	A professional corporation name	e abbreviati must-conta	on "Corp)., ''
B. Enter new principal office address, if applicable:	10437 NW 32 AVE		201	
(Principal office address <u>MUST BE A STREET ADDRESS</u>)	MIAMI, FL 33147	i	9 KO	_ (];
		:	ار 12	
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)	10437 NW 32 AVE	74	<u> </u>	
	MIAMI, FL 33147		11.	_
D. If amending the registered agent and/or registered office address new registered agent and/or the new registered office address		î the		_
	10437 NW 32 AVE		_	
(Florida s	treet address)		_	
New Registered Office Address: MIA	MIAMI Florida_		147	_
	(City)	(Zip	Code)	
New Registered Agent's Signature, if changing Registered Agent I hereby accept the appointment as registered agent. I am familian	nt: - with and accept the obligations of t	he 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 = S = verary; 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 <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. 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)	<u>Title</u>	<u>Name</u>	<u>Addres</u> s
1) Change			
Add			
Remove			
2) Change		<u> </u>	
Add			
Remove 3) Change			
Add			
Remove			
4) Change			
Add			
Remove			
51 Change			
Add			
Remove			
6) Change	 -		
Add			
Remove			
		Page 2 of 4	
E. If amending or addi (Attach additional she	ng addit rets, it ne	ional Articles, enter clange(s) here: cessary). (Be specific)	

		
		
		···
provisions for implementing the amendmen (if not applicable, indicate NA)	reclassification, or cancellation of issued shares, at if not contained in the amendment itself:	
		
		
		
		 _
		
		
	Page 3 of 4	
The date of each amendmentles adoptions		if other than th
date this document was signed.		, outer than ti
and this document was signed.		
Effective date if applicable:		
/	no more than 90 days after amendment file date)	

Note: If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as the document's effective date on the Department of State's records.

Adoption of Anien	lment(s) (<u>CHECK ONE</u>)
	s) was/were adopted by the shareholders. The number of votes east for the amendment(s) ers was/were sufficient for approval.
	s) was/were approved by the shareholders through voting groups. The following statement by provided for each voting group entitled to vote separately on the amendment(s):
"The numb	er of votes cast for the amendment(s) was/were sufficient for approval
by	(voting group)
	(voting group)
☐ The amendment(action was not re	s) was/were adopted by the board of directors without shareholder action and shareholder quired.
The amendments action was not re	s) was'were adopted by the incorpore ars without shareholder action and shareholder quired.
D	nted
S	gnature
	(By a director, president or other officer – if directors or officers have not been selected, by an incorporator – if in the hands of a receiver, trustee, or other court appointed fiduciary by that fiduciary)
	JOSE ANTONIO CASTRO ALONSO
	(Typed or printed name of person signing)
	PRESIDENT/ REGISTERED AGENT
	(Title of person signing)