## P190000 32395

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## **COVER LETTER**

TO: Amendment Section Division of Corporations

Tallahassee, FL 32314

P.O. Box 6327

NAME OF CORPORA	ATION: ELOY SOLUTION	NS INC	
DOCUMENT NUMBI			
The enclosed Articles of	f Amendment and fee are su	bmitted for filing.	
Please return all corresp	ondence concerning this ma	tter to the following:	
E	LOIDIS CANTILLO		
<del>-</del> -		Name of Contact Perso	on
E	LOY SOLUTIONS INC		
_		Firm/ Company	
1	5470 SW 284 ST APT 306		
_		Address	
H	OMESTEAD, FL 33033		
_		City/ State and Zip Coo	de
eloygrii	ngo02@gmail.com		
		sed for future annual repor	t notification)
For further information of ELOIDIS CANTILLO	concerning this matter, pleas		178 9040
		at (	
Name of Contact Person		Area Code & Daytime Telephone Number	
Enclosed is a check for t	he following amount made	payable to the Florida Dep	artment of State:
S35 Filing Fee	□\$43.75 Filing Fee & Certificate of Status	□\$43.75 Filing Fee & Certified Copy (Additional copy is enclosed)	□S52.50 Filing Fee Certificate of Status Certified Copy (Additional Copy is enclosed)
Mailing Address Amendment Section Division of Corporations		Amen	Address dment Section on of Corporations

Clifton Building 2661 Executive Center Circle

Tallahassee, FL 32301

## Articles of Amendment Articles of Incorporation of

ELOY S	OLU.	HONS	INC
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( <u>Name</u>	of Corporation as currently	filed with the Florida De	pt. of State)	-
P19000032395				
<u> </u>	(Document Number of C	Corporation (if known)		
Pursuant to the provisions of section 607 ts Articles of Incorporation:	.1006, Florida Statutes, this <i>Fl</i>	lorida Profit Corporation	adopts the following amenda	ment(s) to
A. If amending name, enter the new n	ame of the corporation:			
			The n	ew
name must be distinguishable and con "Corp.," "Inc.," or Co.," or the design word "chartered," "professional associa	nation "Corp," "Inc," or "Co	o". A professional corpo	vorated" or the abbreviati ration name must contain t	on the
B. Enter new principal office address, Principal office address <u>MUST BE A S</u>				-
		-		-
Enter new mailing address, if appl (Mailing address MAY BE A POST				_
				-
				_
<ol> <li>If amending the registered agent ar new registered agent and/or the ne</li> </ol>	nd/or registered office addres w registered office address:	ss in Florida, enter the n	ime of the	مبر درا
	ELOIDIS CANTILLO			·
	ELOIDIS CANTILLO			-
Name of New Registered Agent	15470 SW 284 ST APT 306			, ; ;
		t address)		1.50 1.50 1.50
	15470 SW 284 ST APT 306	t address)	. Florida 33033	v 30 PB 12: 39

I hereby accept the appointment as registered agent. I fim 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.

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	P	ELOIDIS CANTILLOS	15470 SW 284 ST APT 306
Add		-	HOMESTEAD, FL 33033
X Remove			
2) Change	Р	ELOIDIS CANTILLO	15470 SW 284 ST APT 306
X Add			HOMESTEAD, FL 33033
Remove			
3 ) Change	_		
Add			
Remove			
4) Change			
Add			_
Remove			
5) Change			
Add			<del></del>
Remove			
б) Change		<u> </u>	
Add			
Pamaya			

attach additional sheets, if necessary).	(Be specific)	
<u> </u>		_
•		
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	-	
f an amendment provides for an exch	ange, reclassification, or cancellation of issued shares,	
<u>provisions for implementing the amer</u>	ange, reclassification, or cancellation of issued shares, adment if not contained in the amendment itself:	
f an amendment provides for an exch provisions for implementing the amer (if not applicable, indicate N/A)	ange, reclassification, or cancellation of issued shares, adment if not contained in the amendment itself:	
<u>provisions for implementing the amer</u>	ange, reclassification, or cancellation of issued shares, adment if not contained in the amendment itself:	
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<u>provisions for implementing the amer</u>	ange, reclassification, or cancellation of issued shares, adment if not contained in the amendment itself:	

The date of each amendment(s) a	doption:	, if other than the
date this document was signed.		
	20/2019	
Effective date <u>if applicable</u> :	(no more than 90 days after amendment file date)	<del></del>
	,	
Note: If the date inserted in this I document's effective date on the De	plock does not meet the applicable statutory filing requirements, this epartment of State's records.	date will not be listed as the
Adoption of Amendment(s)	( <u>CHECK ONE</u> )	
☐ The amendment(s) was/were add by the shareholders was/were st	opted by the shareholders. The number of votes cast for the amendme officient for approval.	nt(s)
☐ The amendment(s) was/were app must be separately provided for	proved by the shareholders through voting groups. The following state each voting group entitled to vote separately on the amendment(s):	ement
"The number of votes cast	for the amendment(s) was/were sufficient for approval	
by		
	(voting group)	
action was not required.	opted by the board of directors without shareholder action and shareholder opted by the incorporators without shareholder action and shareholder	
selecte	irector, president or other officer – if directors or officers have not bed, by an incorporator – if in the hands of a receiver, trustee, or other cated fiduciary by that fiduciary)	
	ELOIDIS CANTILLO	
	(Typed or printed name of person signing)	<del></del>
	PRESIDENT	
	(Title of person signing)	·