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(R	Requestor's Name)	
(A	ddress)	
(A	ddress)	
(C	City/State/Zip/Phone	#)
PICK-UP	☐ WAIT	MAIL
(E	Business Entity Nam	e)
(C	Occument Number)	
Certified Copies	Certificates	of Status
Special Instructions to	o Filing Officer:	
Certified Copies	Ocument Number) Certificates	

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COVER LETTER

TO: Amendment Section

Tailahassee, FL 32314

Division of Corporations		
NAME OF CORPORATION: May te	Elix Restoration Co	γP
The enclosed Articles of Amendment and fee are su	ubmitted for filing	
	•	
Please return all correspondence concerning this ma	atter to the following:	
Jeslie	Cirilo Maite	
	Name of Contact Person	_
 		
	Firm/ Company	
5316 San	1 Sebastian Way Apt	_(0/
Rockleage	City/ State and Zip Code	_
1		
tipica (2 AP) 1 tin E-mail address: (to be us	no le a gma, le Com used for future annual report notification)	
For further information concerning this matter, pleas	se call:	
deslie Cirlo Marte	0 at (321) 914-5282	
Name of Contact Person	Area Code & Daytime Telephone Numb	er
Enclosed is a check for the following amount made p	payable to the Florida Department of State:	
\$35 Filing Fee S43.75 Filing Fee & Certificate of Status	□\$43.75 Filing Fee & □\$52.50 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	

2661 Executive Center Circle Tallahassee, FL 32301

Articles of Amendment

to
Articles of Incorporation

,	of				1.0
Smarte Elix	Restor	naiti	(OD)	2019 OCT 28	PH 3: 35
(Name of Co	rporation as currently	filed with the	Florida Dept. of State		
P190000	38639	·			<u>. </u>
	(Document Number of	Corporation (it	known)		
Pursuant to the provisions of section 607.1006, its Articles of Incorporation:	, Florida Statutes, this F	florida Profit C	orporation adopts the f	ollowing amendme	ent(s) to
A. If amending name, enter the new name of	f the corporation:				
	,			The nev	v
name must be distinguishable and contain to "Corp.," "Inc.," or Co.," or the designation word "chartered," "professional association."	"Corp," "Inc," or "C " or the abbreviation "F	Co". A professi	or "incorporated" o ional corporation nam	the abbreviation the must contain the	· J
B. Enter new principal office address, if app (Principal office address MUST BE A STREE		Rock 1 3295	edge, Flo	orida	
C. Enter new mailing address, if applicable (Mailing address MAY BE A POST OFF)		566 Rock 1 3295	balton edge Flo	pla nu	1+ 1
D. If amending the registered agent and/or	rogistored office addrs	occ in Florida d	enter the name of the		
new registered agent and/or the new reg			ther the hame of the		
Name of New Registered Agent					
	(Florida stre	et address)			
New Registered Office Address:			, Florida_		
	(City)		(Zip Code)	
New Registered Agent's Signature, if chang I hereby accept the appointment as registered		ith and accept t	he obligations of the pe	osition.	
	Signature of New Re	egistered 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: X Change	<u>PT</u>	John Doc	
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			
Remove			
3) Change			
Add			
Remove			
4) Change			
Add			
Remove			
5) Change			
Add	 		,
			
Remove		•	
6) Change			
Add			
Remove			

	(Be specific)				
			-		•
	-				
			•		
			•		
			<u> </u>		
			·		
an amendment provides for an exch	ange, reclassificati	on, or cance	lation of issu	ed shares,	
provisions for implementing the ame	nange, reclassificati ndment if not conta	on, or cance	lation of issu	ed shares, self:	
an amendment proyides for an exchorovisions for implementing the ame (if not applicable, indicate N/A)	nange, reclassificati ndment if not conta	on, or cance ained in the s	lation of issu mendment it	ed shares, self:	
provisions for implementing the ame	nange, reclassificati ndment if not conta	on, or cancel	lation of issu mendment it	ed shares, self:	
provisions for implementing the ame	nange, reclassificati ndment if not conta	on, or cance ained in the a	lation of issu mendment it	ed shares, self:	
provisions for implementing the ame	nange, reclassificati ndment if not conta	on, or cancel	lation of issu mendment it	ed shares, self:	
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provisions for implementing the ame	nange, reclassificati	on, or cancel	lation of issumendment it	ed shares, self:	

The date of each amendment(s) adoption:
date this document was signed.
Effective date if applicable:
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 Amendment(s) (CHECK ONE)
The amendment(s) was/were adopted by the shareholders. The number of votes cast for the amendment(s) by the shareholders was/were sufficient for approval.
☐ The amendment(s) was/were approved by the shareholders through voting groups. The following statement must 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)
(voting group)
☐ The amendment(s) was/were adopted by the board of directors without shareholder action and shareholder action was not required.
☐ The amendment(s) was/were adopted by the incorporators without shareholder action and shareholder action was not required.
Dated
Signature Lollo G. Morto (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)
Testie Cirito Walte (Typed or printed name of person signing)
(1 yped or printed name of person signing)
Vice - President
(Title of person signing)