P190000 39725

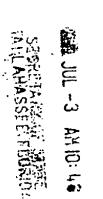
(Requestor's Name)
(Address)
(Address)
(City/State/Zip/Phone #)
(City) Cito(2) pri vene vy
PICK-UP WAIT MAIL
(Business Entity Name)
(Document Number)
Certified Copies Certificates of Status
Special Instructions to Filing Officer:

Office Use Only



100331262191

97/03/19--01015--009 **35.0



ا در ا

COVER LETTER

		COVERTERIOR		
O: Amendment Sectio				
Division of Corpor	ations			
SAME OF COUROUS	ATION: NORTH BEACON	SINC	•	
NAME OF CORPORE	D10000030735			
OCCUMENT NUMBE	CR: P19000039725			
	Amendment and fee are su			Wee.
lease return all corresp	ondence concerning this ma	tter to the following:		
A	LDO MARCHENA			
_	•	Name of Contact Person	1	
_		Firm/ Company		
2	385 NW EXECUTIVE CE	STER DR. SUITE 100		
_		Address	· · ·	
В	OCA RATON, FL 33431			
		City/ State and Zip Code		
		•		
		_		
	E-mail address: (to be us	sed for future annual report	notification)	
or further information (concerning this matter, pleas	se call:		
ALDO MARCHENA		561	451-6330	
	Contact Person	at (de & Daytime Telephone Number	
nclosed is a check for t	he following amount made	payable to the Florida Depa	rtment of State:	
\$35 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		Amend Divisio Clifion 2661 E	Address ment Section n of Corporations Building xecutive Center Circle ssee, FL 32301	

Articles of Amendment to Articles of Incorporation

NORTH BEACON INC

(<u>(vaine of Corp</u> orat <u>ion as currer</u> P19000039725	ntly filed with the Florida Dept, of State)	
	of Corporation (if known)	7
Pursuant to the provisions of section 607.1006, Florida Statutes, thits Articles of Incorporation;	is Florida Profit Corporation adopts the fol	lowing amending
A. If amending name, enter the new name of the corporation:		
N/A		The ne
name must be distinguishable and contain the word "corporat "Corp.," "Inc.," or Co.," or the designation "Corp," "Inc," or word "chartered," "professional association," or the abbreviation	"Co". A professional corporation name i	
3. Enter new principal office address, if applicable:	N/A	
Principal office address <u>MUST BE A STREET ADDRESS</u>)		
	· · · · · · · · · · · · · · · · · · ·	
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)	N/A	
		- ,
 If amending the registered agent and/or registered office ad new registered agent and/or the new registered office addre 		
NIA	111.	
Name of New Registered Agent		
	street address)	
N/A		
New Registered Office Address:	, Florida (City)	(Zip Code)

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 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 = Executive Officer; CFO = Chief Financial Officer. If an officer/director holds more than one title, list the first letter of each hold. 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 Ψ . The a change, Mike Jones leaves the corporation, Sally Smith is named the Ψ and Ψ . These should be noted as John Doe, PT as a Change, Ψ as Remove, and Sally Smith, Ψ 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>	Name	Address
1) Change	S	JUAN CARLOS MARTINEZ	9907 THREE LAKES CIR
X Add			BOCA RATON, FL 33428
Remove			
2) Change			
Add			
Remove			
3) Change		<u> </u>	
Add			
Remove			
4) Change		<u> </u>	
Add			
Remove			
5) Change		_	
Add			
Remove			
6) Change			
Add			
Remove			

	ning additional Articles, heets, if necessary). — (Be				
N/A					
			-		-, ,_ -
			•		
				•	
				<u> </u>	
				· <u></u>	
•			· •		
					·- ·-
F. If an amendment p	provides for an exchange plementing the amendm	e, reclassification, or	cancellation of issue	ed shares.	
(if not applica	ble, indicate N/A)	CHI II II COMAINCO	n the amendment its	eer.	
N/A					
					
					
		···			

	JUNE 3	27, 2019		
The date of each amendment(s)				, if other the
date this document was signed.				
JU	NE 27, 2019			
Effective date <u>if applicable</u> :	(ne	o more than 90 days afte	er amendment file date)	
Note: If the date inserted in this document's effective date on the I			tory filing requirements, this da	te will not be listed a
Adoption of Amendment(s)	(<u>CHECE</u>	K ONE)		
■ The amendment(s) was/were as by the shareholders was/were:	-		f votes east for the amendment(s	s)
☐ The amendment(s) was/were a must be separately provided for				ગા
"The number of votes can	st for the amendme	ent(s) was/were sufficien	it for approval	
p	(voting s	· · -		
	(voting §	group)		
☐ The amendment(s) was/were a action was not required.	dopted by the boar	rd of directors without sh	narcholder action and shareholde	er -
☐ The amendment(s) was/were as action was not required.	dopted by the incor	rporators without shareh	older action and shareholder	
JUNE 27 Dated	. 2019			
	5 [
Signature				
			ectors or officers have not been a receiver, trustee, or other cour	ı
	inted fiduciary by t		a receiver, trustee, or other con-	•
-11		•		
	IGNACIO 🤼 EG	CHENIQUE		
	(Type	ed or printed name of pe	erson signing)	
	PRESIDENT			
	·	(Title of person s	igning)	