P19000040850

(Re	equestor's Name)	
(Ac	ddress)	
(Ac	idress)	
(Ci	ty/State/Zip/Phone	#)
PICK-UP	WAIT	MAIL
(Bu	usiness Entity Nam	е)
(Dx	ocument Number)	
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J. FASON

JUL 1 9 2021



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COVER LETTER

TO: Amendment Section

Division of Corporations			
NAME OF CORPORATION: <u>JU</u>	lce thennel	loop 5	·
DOCUMENT NUMBER: 719000	0040850	··	
The enclosed Articles of Amendment ar	d fee are submitted	for filing.	
Please return all correspondence concern	ing this matter to th	e following:	
Jaha	ira Martín	62 Banks e of Contact Person	
7.1	D. Box 2 lissimmec,	Firm/ Company 50 292 Address	
<i></i>	liSSLMMeC, City/	State and Zip Code	15
	22. i Chairal ss: (1) he used for fi		
For further information concerning this i	natter, please call:		
Alma D. Delgado Name of Confact Person		at (<u>32</u>]	, <u>132 - 0591</u> e & Daytime Telephone Number
· ·			•
Enclosed is a check for the following an	ount made payable	to the Florida Depa	rtment of State:
☐ \$35 Filing Fee ☐ \$43.75 Fil Certificate	of Status Cert (Add	7.75 Filing Fee & iffied Copy litional copy is losed)	☐\$52,50 Filing Fee Certificate of Status Certified Copy (Additional Copy is enclosed)
Mailing Address		Street A	
Amendment Section			nent Section
Division of Corporation	ns		of Corporations
P.O. Box 6327 Tallahassee, FL 32314		The Ce	n of Corporations ntre of Tallahassee . Monroe Street, Suite 810

Tallahassee, FL 32303

Articles of Amendment

to

Articles of Incorporation

of

Julce thennel Corp 5		
	currently filed with the Florida De	pt, of State
P190000 408 20	amber of Corporation (if known)	
Pursuant to the provisions of section 607,1006, Florida Statut ts Articles of Incorporation:	•	adopts the following amendment(
A. If amending name, enter the new name of the corpora	tion:	
XI A		The new
name must be distinguishable and contain the word "corporate "lnc.," or Co.," or the designation "Corp," "lnc," or "Corp, "etactered," "professional association," or the abbreviation	Co". A professional corporation "P.A."	" or the abbreviation "Corp.,"
B. Enter new principal office address, if applicable: Principal office address <u>MUST BE A STREET ADDRESS</u>	<u>N/A</u>	
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)	<u> </u>	
If amending the registered agent and/or registered offinew registered agent and/or the new registered office a Name of New Registered Agent		ame of the
(Flo	orida street address)	
		Vlasida
New Registered Office Address:	(City)	Florida (Zip Code)
New Registered Agent's Signature, if changing Registered hereby accept the appointment as registered agent. I am fa Main	miliar with and accept the obligation	2

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)

Example:

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 Doc	
X Remove	$\underline{\mathbf{V}}$	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	<u>3V</u>	<u>l'arlos A. Jodriguez 3</u>	Suarez 137 Can Hollow Sr. Haines City, FL 3384
X_ Add		· ·	Haines City, FL 3384
Remove			41-
2) Change			
Add			
Remove 3) Change			
Add			
Remove			
4) Change			
Add			
Remove			
5) Change			
Add			
Remove			
6) Change			
Add			
Remove			

E. If amending or adding additional Articles, enter change(s) here: (Attach additional sheets, if necessary). (Be specific)	
NIA	
	
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)	
NA	

The date of each amendment(s) adoption: Well 16, 202 (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)
Effective date if applicable: Ino 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 incorporators, or board of directors without shareholder action and shareholder action was not required. 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 Marka Warf was/were sufficient for approval.
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hy Jaharra Wartinez Banks
Dated June He, 2021
Dated June 16, 2021
Dated June Me, 2021
Dated Wa
Martin Dall &
Signature (By a director, president or other officer – a 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)
Jahaira Mortinez Banks
(Typed or printed name of person signing)
(Prasidont
(Title of person signing)