P190000042263

(Requestor's Name)
(Address)
(100)
(Address)
(City/State/Zip/Phone #)
PICK-UP WAIT MAIL
(Business Entity Name)
(Document Number)
Certified Copies Certificates of Status
Special Instructions to Filing Officer:

Office Use Only



700330844617

EBJING (TO CINC GARAGE

19 JW 21 PH 1:2

JUL 0 2 2019 S. YOUNG

COVER LETTER

TO: Amendment Section Division of Corporations

NAME OF CORPORATION: Linkor Service 1	Inc
DOCUMENT NUMBER: P19000042263	
The enclosed Articles of Amendment and fee are	submitted for filing.
Please return all correspondence concerning this	matter to the following:
Pavel Shulmin	
	Name of Contact Person
Linkor Service Inc	
	Firm/ Company
230 174th Street Apt 211	• •
	Address
Sunny Isles Beach, FL 33	160
	City/ State and Zip Code
alexeyrenaldo@gmail.com	
. 30	e used for future annual report notification)
	•
For further information concerning this matter, pl	lease call:
Alex Renaldo	at (305) 775-0163
Name of Contact Person	at () Area Code & Daytime Telephone Number
	,
Enclosed is a check for the following amount made	de payable to the Florida Department of State:
■ \$35 Filing Fee	
Mailing Address Amendment Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314	Street Address Amendment Section Division of Corporations Clifton Building 2661 Executive Center Circle Tallahassee, FL 32301

Articles of Amendment to Articles of Incorporation of

Linkor Service Inc

(Name of Corporation as currently	filed with the Florida Dept. of State)			
P19000042263				
(Document Number of	Corporation (if known)			_
Pursuant to the provisions of section 607.1006. Florida Statutes, this Its Articles of Incorporation:	Florida Profit Corporation adopts the fo	Howing at	nendmen	ı L
A. If amending name, enter the new name of the corporation:				
		73	ie new	
name must be distinguishable and contain the word "corporation "Corp.," "Inc.," or Co.," or the designation "Corp." "Inc." or "C word "chartered," "professional association," or the abbreviation ".	To". A professional corporation name	the abbr	eviation	
B. Enter new principal office address, if applicable:				
(Principal office address <u>MUST BE A STREET ADDRESS</u>)				
			 _	
C. Enter new mailing address, if applicable:		1	,	
(Mailing address MAY BE A POST OFFICE BOX)		<u> </u>	<u> </u>	T
			2	
			—— ;	- -
			_ <u>===</u>	'-
D. If amending the registered agent and/or registered office addr			÷. 2	
new registered agent and/or the new registered office address:		3.41		
Name of New Registered Agent				
(Florida stre	ret address)			
New Registered Office Address:	, Florida			
	(City)	(Zip Cod	e)	
New Registered Agent's Signature, if changing Registered Agent:	ear a caracter ear			
I hereby accept the appointment as registered agent. I am familiar w	th and accept the obligations of the pos	ation.		
Signature of New Ro	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, a 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 = Cl. Executive Officer; CFO = Chief Financial Officer. If an officer/director holds more than one title, list the first letter of each of, held, President, Treasurer, Director would be PTD.

Changes should be noted in the following manner. Currently John Doc is listed as the PST and Mike Jones is listed as the V. Thera change, Mike Jones leaves the corporation, Sally Smith is named the V and S. These should be noted as John Doc, PT as a Chan-Mike Jones, V as Remove, and Sally Smith, SV as an Add.

Example: \underline{X} Change	<u>PT</u>	John Do	<u>oe</u>	
X Remove	\underline{V}	Mike Jo	<u>mes</u>	
X Add	<u>sv</u>	Sally Su	<u>nith</u>	
Type of Action (Check One)	<u>Title</u>		<u>Name</u>	<u>Addres</u> s
I) Change	P	_	Pavel Shulman	230 174th Street Apt 2117
Add				Sunny Isles Beach, FL 33160
XX Remove				
2) Change	<u>р</u>	_	Pavel Shulmin	230 174th Street Apt 2117
XX Add				Sunny Isles Beach, FL 33160
Remove				
3) Change	· ········	_		
Add				
Remove				
4) Change		_		· · · · · · · · · · · · · · · · · · ·
Add				
Remove				
5) Change				
Add				
Remove				
C)				
6) Change				
Add				
Remove				

	sheets, if necessary).). (Be specific)			
			-		
				_	
				,	
			·		
					
					<u> </u>
		 -			
f an amendment	provides for an exc	change, reclassif	ication, or cancella	ation of issued sha	res,
provisions for in	<u>plementing</u> the am	<u>rendment if not </u>	ication, or cancell contained in the ar	ation of issued sha nendment itself:	res,
<u>provisions for in</u>	provides for an exc plementing the am able, indicate N/A)	<u>rendment if not </u>	ication, or cancell contained in the ar	ation of issued sha nendment itself:	res,
<u>provisions for in</u>	<u>plementing</u> the am	<u>rendment if not </u>	ication, or cancell contained in the ar	ation of issued sha nendment itself:	res,
<u>provisions for in</u>	<u>plementing</u> the am	<u>rendment if not </u>	ication, or cancell contained in the ar	ation of issued sha nendment itself:	res,
<u>provisions for in</u>	<u>plementing</u> the am	<u>rendment if not </u>	ication, or cancell contained in the ar	ation of issued sha nendment itself:	res,
provisions for in	<u>plementing</u> the am	<u>rendment if not </u>	ication, or cancell contained in the ar	ation of issued sha nendment itself:	res,
provisions for in	<u>plementing</u> the am	<u>rendment if not </u>	ication, or cancell contained in the ar	ation of issued sha nendment itself:	res,
provisions for in	<u>plementing</u> the am	<u>rendment if not </u>	ication, or cancell contained in the ar	ation of issued sha nendment itself:	res,
provisions for in	<u>plementing</u> the am	<u>rendment if not </u>	fication, or cancell contained in the ar	ation of issued sha nendment itself:	res,
provisions for in	<u>plementing</u> the am	<u>rendment if not </u>	fication, or cancell contained in the ar	ation of issued sha nendment itself:	res,
provisions for in	<u>plementing</u> the am	<u>rendment if not </u>	fication, or cancell contained in the ar	ation of issued sha nendment itself:	res,

The date of each amendment(s) adoption:, if other t date this document was signed.
Effective date if applicable: (no more than 90 days after amendment file date)
(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 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)
☐ 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.
6/19/2019 Dated
Signature Massure
(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)
Pavel Shulmin
(Typed or printed name of person signing)
p
(Title of person signing)