P19000046488

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COVER LETTER

TO: Amendment Section Division of Corporations

NAME OF CORPOR	ation: <u><i>Équeral</i></u> er: <u>119000046</u> 5	Becurity & T	Technology Oodo			
DOCUMENT NUMB	er: <u> <i>P190000464</i></u>	488				
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:				
-	Ramo	n Reyes Name of Contact Person				
	Ramon Reyes Name of Contact Person Ramon Reyes P.A. Print Company					
-	67)36	Palm Ave				
		Address				
-	Hralea	6 Fl 330, City/ State and Zip Code	<u> </u>			
-		Sayron regles for future annual report				
For further information	concerning this matter, pleas	se call:				
Ramie	n Reyes	ar (<u>305</u>	877-0669			
Name of	Contact Person	Area Co	de & Daytime Telephone Number			
Enclosed is a check for	the following amount made	payable to the Florida Depa	irtment 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		Street Address Amendment Section Division of Corporations The Centre of Tallahassee 2415 N. Monroe Street, Suite 810				

Tallahassee, FL 32303

Articles of Amendment to

Articles of Incorporation

Conseal Comitive Trabanches	Pach
(Name of Corporation as currently filed with the Florida Dept. of	State)
(Document Number of Corporation (if known)	
Pursuant to the provisions of section 607,1006, Florida Statutes, this <i>Florida Profit Corporation</i> adopts its Articles of Incorporation:	the following amendment(s) to
A. If amending name, enter the new name of the corporation:	
	The new
name must be distinguishable and contain the word "corporation," "company," or "incorporated" or to "Inc.," or Co.," or the designation "Corp." "Inc," or "Co". A professional corporation name "chartered," "professional association," or the abbreviation "P.A."	
B. Enter new principal office address, if applicable: (Principal office address MUST BE A STREET ADDRESS)	
· · · · · · · · · · · · · · · · · · ·	
	<u></u>
C. Enter new mailing address, if applicable:	
(Mailing address MAY BE A POST OFFICE BOX)	
	 -
	<u></u>
	<u></u>
D. If amending the registered agent and/or registered office address in Florida, enter the name of new registered agent and/or the new registered office address:	<u>Fthe</u>
Name of New Registered Agent Bruno Santoyo Carda 15413 SW 1274 Terr	
15413 SUD 1274 Terr	
(Florida street address)	
New Registered Office Address: Marri	add 23/9V
(City)	(Zip Code)
New Registered Agent's Signature, if changing Registered Agent: Thereby accept the appointment as registered agent. Tam familiar with and accept the obligations of a Signature of New Registered Agent, if changing Check if applicable	he position.
☐ The amendment(s) is/are being filed pursuant to s. 607.0120 (11) (e), F.S.	
•	

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	<u>\$</u>		
<u>X</u> Add	<u>sv</u>	Sally Smitl	1		
Type of Action (Check One)	Title	<u>N</u> :	<u>ame</u>		Address
1) Change	P	£	Bruno Sant	byo Garu'u	15413 SW 12TH TON
_ <u>X</u> Add		-			Heami H.
Remove			_	, -	33194
2) Change	P	_ [enriter Mon	ntesim	2420 SW 147 AVE
Add					# 121 Mami Fl
Remove Change		<u></u>			33185
Add					
Remove				· _	
4) Change					
Add					
Remove				_	
5) Change					
Add				-	
Remove				-	
6) Change					
Add				-	
Remove					

Attach aa	lditional she	i <mark>g additional A</mark> ets, if necessary	e). (Be spec	fic)				
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fan ame	andment aco	widee for an a	vehanaa eael	ecification o	e canoullation	r af icenad cha	*****	
provisio	ns for imple	vides for an evenenting the ar	mendment if	not contained	in the amend	lment itself:	1.05.	
(if n	ot applicable	; indicate N/A)						
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<u>-</u>							-	
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The date of each amendment(s) adopt date this document was signed.	ion: 8/19/2020	, if other than the
•	(G (2071)	
Effective date i <u>r abbucapie</u> : <u>87 / (</u>	(no more than 90 days after amendment file	date)
Note: If the date inserted in this block document's effective date on the Departi	does not meet the applicable statutory filing requirement of State's records.	ements, this date will not be listed as the
Adoption of Amendment(s)	(<u>CHECK ONE</u>)	
★ The amendment(s) was/were adopted action was not required.	by the incorporators, or board of directors without sh	nareholder action and shareholder
☐ The amendment(s) was/were adopted by the shareholders was/were sufficient	by the shareholders. The number of votes east for the ent for approval.	e amendment(s)
	d by the shareholders through voting groups. <i>The fol voting group entitled to vote separately on the amen</i>	
"The number of votes cast for the	he amendment(s) was/were sufficient for approval	
hy		
	(voting group)	
selected, by	or, president or other officer – if directors or officers l an incorporator – if in the hands of a receiver, trustee duciary by that fiduciary)	
	Bruno Sarricyo Gar (Typed or printed name of person signing)	ría
 -	President	
	(Title of person signing)	