(Requestor's Name) (Address)	100330201721
(City/State/Zip/Phone #) PICK-UP WAIT MAIL (Business Entity Name) (Document Number) Certified Copies Certificates of Status	08/17/1901033013 ** 55.00
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COVER LETTER

TO: Amendment Section Division of Corporations

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NAME OF CORPORATION: _	DOWNTOWN EXOTIC RENTALS, CORP
DOCUMENT NUMBER:	P19000046716

The enclosed Articles of Amendment and fee are submitted for filing.

Please return all correspondence concerning this matter to the following:

ANTHONY PEREZ

Name of Contact Person

DOWNTOWN EXOTIC RENTALS, CORP

Firm/ Company

2300 NW 27TH AVENUE

Address

MIAMI, FLORIDA 33142

City/ State and Zip Code

anthonyperez03@hotmail.com

E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

 ANTHONY PEREZ
 at (
 786
 431-6034

 Name of Contact Person
 Area Code & Daytime Telephone Number

Enclosed is a check for the following amount made payable to the Florida Department of State:

S35 Filing Fee

□\$43.75 Filing Fee & Certificate of Status □\$43.75 Filing Fee & Certified Copy (Additional copy is enclosed) S52.50 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 <u>Street Address</u> Amendment Section Division of Corporations Clifton Building 2661 Executive Center Circle Tallahassee, FL 32301

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Articles of Ame	adment		
to			
Articles of Incorr	ooration		
of	_		
Downtown protic	Gentals, Curp		
(<u>Name of Corpora</u> tion as currently fi)	
$\sim \mathcal{P}[q \ \partial \partial \phi \phi]$	46716		
(Document Number of Co	prporation (if known)	· · · · ·	
Pursuant to the provisions of section 607.1006, Florida Statutes, this <i>Flo</i> its Articles of Incorporation:	rida Profit Corporation adopts the f	ollowing amend	ment(s)
A. If amending name, enter the new name of the corporation:			
		The n	ew.
name must be distinguishable and contain the word "corporation," "Corp.," "Inc.," or Co.," or the designation "Corp." "Inc." or "Co word "chartered," "professional association," or the abbreviation "P.: B. Enter new principal office address, if applicable: (Principal office address <u>MUST BE A STREET ADDRESS</u>)	". A professional corporation nam		
C. <u>Enter new mailing address, if applicable:</u> (Mailing address <u>MAY BE A POST OFFICE BOX</u>)			_
		S[20	_
		JAN S	
D. If amending the registered agent and/or registered office address new registered agent and/or the new registered office address: Name of New Registered Agent	in Florida, enter the name of the $Pe(e7)$	LAHASSEE	
$\frac{3300}{(Florida street)}$	address)	9:4	
New Registered Office Address:(Ci	, Florida ტუ	33 LA (Zip Code)	_

<u>New Registered Agent's Signature, if changing Registered Agent:</u> I hereby accept the appointment as registered agent. I am familiar with and accept the obligations of the position.

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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, ar address of each Officer and/or Director being added:

(Attach additional sheets, if necessary)

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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 = ChiExecutive Officer; CFO = Chief Financial Officer. If an officer/director holds more than one title, list the first letter of each officheld, 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 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 Chang Mike Jones, V as Remove, and Sally Smith, SV as an Add. **Example:**

Example: X_Change	<u>PT</u>	<u>John D</u>	loe	
<u>X</u> Remove	<u>V</u>	<u>Mike J</u>	ones	
<u>X</u> Add	<u>sv</u>	<u>Sally S</u>	Smith	
<u>Type of Action</u> (Check One)	<u>Title</u>		Name	<u>Addres</u> s
1) Change		_		
Add				
Remove				
2) Change	Sec	<u> </u>	CARMEN CONEO	479 NE 30TH STREET APT 709
Add				MIAMI, FLORIDA 33136 US
X Remove				
3) Change				
Add				
Remove				
4) Change	<u> </u>			
Add				
Remove				
5) Change				
Add				
Remove				
6) Change	<u></u> .	_		
Add				
Remove				

E.	If amending o	r adding additional	Articles, enter	change(s) here:
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(Attach additional sheets, if necessary). (Be specific) I am adding the new EMPLOYER IDENTIFICATION NUMBER 84-2037908. See document attached.

..... _____ __ --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) _____

JUNE 11TH 2019	
The date of each amendment(s) adoption:, if oth date this document was signed.	ier than t
JUNE 12TH 2019 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 lidocument's effective date on the Department of State's records.	sted as t
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. <i>The following statement must be separately provided for each voting group entitled to vote separately on the amendment(s):</i>	
"The number of votes cast for the amendment(s) was/were sufficient for approval	
by	
(voling 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.	
JUNE 11TH 2019 Dated	
Signature	
ANTHONY PEREZ	
(Typed or printed name of person signing)	
PRESIDENT	
(Title of person signing)	