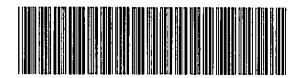
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COVER LETTER

TO: Amendment Section Division of Corporations NAME OF CORPORATION: _____ JAIME JAVIER SOLIS GARCIA PA DOCUMENT NUMBER: P19000048332 The enclosed Articles of Amendment and fee are submitted for filing. Please return all correspondence concerning this matter to the following: CARLA MARCELO Name of Contact Person Firm/ Company 7050 W PALMETTO PARK ROAD #15-300 Address BOCA RATON, FL 33433 City/ State and Zip Code ADMIN@ACHIEVEGEA.COM E-mail address: (to be used for future annual report notification) For further information concerning this matter, please call: CARLA MARCELO at (305) 677-2151 Area Code & Daytime Telephone Number Name of Contact Person Enclosed is a check for the following amount made payable to the Florida Department of State: **\$35** Filing Fee □\$43.75 Filing Fee & □\$43.75 Filing Fee & □\$52.50 Filing Fee Certificate of Status Certified Copy Certificate of Status (Additional copy is Certified Copy

enclosed)

Mailing Address

Amendment Section Division of Corporations P.O. Box 6327 Tallahassee, F1, 32314 Street Address

Amendment Section
Division of Corporations
The Centre of Tallahassee
2415 N. Monroe Street, Suite 810
Tallahassee, FL 32303

(Additional Copy is enclosed)

Articles of Amendment to Articles of Incorporation of

JAIME JAVIER SOLIS GARCIA PA

(Name of Corporation	on as currently filed wi	th the Florida Dept. of St	ate)'.
P19000048332			
(Docum	ent Number of Corporat	ion (if known)	<u> </u>
Pursuant to the provisions of section 607,1006, Florida ts Articles of Incorporation:	Statutes, this Florida Pi	rofit Corporation adopts th	ne following amendment(s
A. If amending name, enter the new name of the co	rporation:		
name must be distinguishable and contain the word "co "Inc.," or Co.," or the designation "Corp," "Inc." "chartered," "professional association," or the abbrev	or "Co" A profession	or "incorporated" or the onal corporation name m	The new abbreviation "Corp.," ust contain the word
3. Enter new principal office address, if applicable; Principal office address MUST BE A STREET ADD			
Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BO)	<u></u>		
D. If amending the registered agent and/or register new registered agent and/or the new registered of		orida, enter the name of t	<u></u>
Name of New Registered Agent			
	(Florida street address		
New Registered Office Address:	(Cuv)	, Floric	da
	κ.μ.,		rzap Code)
New Registered Agent's Signature, if changing Regi hereby accept the appointment as registered agent. I	i <mark>stered Agent:</mark> I am familiar with and a	ecept the obligations of the	? position.
Signa	ture of New Registered .	Agent, if changing	

Check if applicable

☐ 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:

 $P = President; \ F = Vice President; \ T = Treasurer; \ S = Secretary; \ D = Director; \ TR = Trustee; \ C = Chairmon or Clerk; \ CE() = Chief Executive Officer; \ CFO = Chief Financial Officer. If an officer/director holds more than one title, list the first letter of each office held. President, Treasurer, Director would be PTD.$

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	
X Add	<u>sv</u>	Sally Smith	
Type of Action (Check One)	<u>Title</u>	<u>Name</u>	<u>Addres</u> s
1) Change	S	WILLIAMS, RAYONDA	1221 BRICKELL AVE, SUITE 90
Add			MIAMI, FL 33131
X Remove			 -,
2) Change			
Add			
Remove 3) Change		- 	
Add			
Remove			
4) Change			
Add			
Remove			
5) Change			
Add			
Remove			
6) Change			
Add			
Remove			

ttach	additional she	ng additional A rets, if necessary). (Be specifi	c)			
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an ai	nendment pr	ovides for an ev	change, reclas	sification, or o	ancellation of	issued shares,	
rovis) G	<u>tons for impl</u> Sant applicable	ementing the ar le, indicate N/A)	mendment if no	ot <u>c</u> ontain <u>ed</u> ir	i the amendme	<u>nt itself:</u>	
(9	тип саруписат	c. mateure iviny					
							
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The date of each amendment(date this document was signed.	s) adoption:	, if other than the
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 the document's effective date on the	nis block does not meet the applicable statutory filing requirements, this of Department of State's records.	date will not be listed as the
Adoption of Amendment(s)	(<u>CHECK ONE</u>)	
☐ The amendment(s) was/were action was not required.	adopted by the incorporators, or board of directors without shareholder ac	tion and shareholder
The amendment(s) was/were by the shareholders was/we	e adopted by the shareholders. The number of votes east for the amendmen re sufficient for approval.	u(s)
	e approved by the shareholders through voting groups. The following states of approved by the shareholders through voting group entitled to vote separately on the amendment(s):	
"The number of votes	cast for the amendment(s) was/were sufficient for approval	7022 JUL
by	(voting group)	L 20
	·	71
07/14/; Dated		PA 6: 27
Signature	JAIME JAVIER SOLIS GARCIA	27
(By	a director, president or other officer – if directors or officers have not been ected, by an incorporator – if in the hands of a receiver, trustee, or other copointed fiduciary by that fiduciary)	
	JAIME JAVIER SOLIS GARCIA	
	(Typed or printed name of person signing)	
	PRESIDENT	
	(Title of person signing)	