| (Re | questor's Name) | |
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| Certified Copies | Certificates o | f Status |
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| Special Instructions to | Filing Officer: | |
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Office Use Only



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09/20/19---01005--019 **35.00

COVER LETTER

TO: Amendment Section Division of Corporations Licea J Services Corp NAME OF CORPORATION: 919000048428 DOCUMENT NUMBER: _ The enclosed Articles of Amendment and fee are submitted for filing. Please return all correspondence concerning this matter to the following: Licea Rios
Name of Contact Person Licea J Services For further information concerning this matter, please call: Enclosed is a check for the following amount made payable to the Florida Department of State: S35 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

enclosed)

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

Certified Copy

(Additional Copy is enclosed)

Articles of Amendment

| , | Articles of Incorporation | |
|---|---|-------------------|
| _ | of O | |
| Licea J S | Dervices lond | |
| (Name of Corporat | ion as currently filed with the Florida Dept, of State) | |
| P 1900004 | 8428 | |
| | ment Number of Corporation (if known) | |
| regularity to the appropriate of regular (47, 1007, F) with | | |
| s Articles of Incorporation: | la Statutes, this Florida Profit Corporation adopts the follo | wing amendment(s) |
| . | | |
| . If amending name, enter the new name of the c | orporation: | |
| | | The new |
| me must be distinguishable and contain the wor | rd "corporation," "company," or "incorporated" or the | e abbreviation |
| Corp., Inc., or Co., or the designation "Corp. ord "chartered," "professional association," or the | o." "Inc." or "Co". A professional corporation name mu | ust contain the |
| The source of programma distribution, or me | Tanne Tan. | |
| Enter new principal office address, if applicable | | |
| Principal office address <u>MUST BE A STREET ADI</u> | <u>DRESS</u>) | |
| | | |
| | | |
| Enter new mailing address, if applicable: | | |
| (Mailing address MAY BE A POST OFFICE BO | <u></u> | |
| | | |
| | | |
| | | 6 577 |
| . If amending the registered agent and/or registe | red office address in Florida, enter the name of the | 一 等 医 |
| new registered agent and/or the new registered | office address: | 20 |
| Name of M. D. Co. L. | | _ SOB |
| Name of New Registered Agent | | — 語 |
| | | 3. |
| | (Florida street address) | |
| New Registered Office Address: | , Florida | ಭಾ |
| | | Zip Code) |
| | · · | ap coucy |
| Com Project and America Company | | |
| ew Registered Agent's Signature, if changing Reg hereby accept the appointment as registered agent | vistered Agent: I am familiar with and accept the obligations of the position | |
| accept on appointment as registered agent. | was jammar wan and accept the onligations of the position | м. |
| | | |
| | | |
| Sion | nature 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, 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.

| Example: <u>X</u> Change | <u>PT</u> | John Doe | |
|-----------------------------|--------------------------|------------------------|-------------------|
| X Remove | $\underline{\mathbf{V}}$ | Mike Jones | |
| <u>X</u> Add | <u>SV</u> | Sally Smith | |
| Type of Action (Check One) | <u>Title</u> | <u>Name</u> | Address |
| 1) Change | | Rusland J: manez ferez | 16851 Ne 23 au |
| Add | | • | north miami beach |
| X_ Remove | | | FL, 33160. |
| 2) Change | | | |
| Add | | | |
| Remove | | | |
| 3) Change | | | |
| Add | | , | |
| Remove | | | |
| 4) Change | | | |
| Add | | | |
| Remove | | | |
| 5) Change | | | |
| Add | | | |
| Remove | | | |
| 6) Change | | | |
| Add | | | |
| Remove | | | |

| If amending or adding additional Ar (Attach additional sheets, if necessary). | . (Be specific) |
|---|---|
| n/a | |
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| If an amendment provides for an exc | change, reclassification, or cancellation of issued shares, |
| (if not applicable, indicate N/A) | endment if not contained in the amendment itself: |
| | |
| / | |
| N/A | |
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| The date of each amendment(s) ad date this document was signed. | option: | , if other than the |
|---|---|-----------------------------|
| Effective date <u>if applicable</u> : | | |
| Elicetive date <u>ir appireatit</u> . | (no more than 90 days after amendment file date) | |
| Note: If the date inserted in this bl document's effective date on the Dep | lock does not meet the applicable statutory filing requirements, this data partment of State's records. | e will not be listed as the |
| Adoption of Amendment(s) | (<u>CHECK ONE</u>) | , |
| ☐ The amendment(s) was/were ado by the shareholders was/were suf | pted by the shareholders. The number of votes east for the amendment(s) Ticient for approval. | |
| ☐ The amendment(s) was/were appropriately provided for a | roved by the shareholders through voting groups. The following statement each voting group entitled to vote separately on the amendment(s): | 11 |
| "The number of votes cast t | or the amendment(s) was/were sufficient for approval | |
| by | (voting group) | |
| | (voting group) | |
| The amendment(s) was/were adopaction was not required. | pted by the board of directors without shareholder action and shareholder | |
| ☐ The amendment(s) was/were adopaction was not required. | pted by the incorporators without shareholder action and shareholder | |
| Dated9 | /16/19 | |
| Signature | Drivelo | |
| (By a di selected | rector, president or other officer – if directors or officers have not been , by an incorporator – if in the hands of a receiver, trustee, or other court ed fiduciary by that fiduciary) | |
| - | Sandy Licea Rios. (Typed or printed name of person signing) | |
| _ | President. | |
| | (Title of person signing) | |

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