## P19000050514

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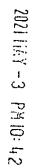
J. FASON JUN 18 2021



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## COVER LETTER

TO: Amendment Section Division of Corporations NAME OF CORPORATION: \_\_\_\_\_ JANETH L SILVA, INC. DOCUMENT NUMBER: P19000050514 The enclosed Articles of Amendment and fee are submitted for filling. Please return all correspondence concerning this matter to the following: JANETH L SILVA Name of Contact Person JANETH L SILVA, INC. Firm/ Company 16385 BISCAYNE BLVD UNIT #617 Address NORTH MIAMI BEACH, FL 33160 City/ State and Zip Code Servimaxservices@gmail.com E-mail address: (to be used for future annual report notification) For further information concerning this matter, please call: JANETH L SILVA at ( 954 ) 5486464 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

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enclosed)

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Mailing Address

Amendment Section Division of Corporations P.O. Box 6327

Certificate of Status

Tallahassee, FL 32314

Street Address

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

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## Articles of Amendment to Articles of Incorporation of

(Name of Corporation as currently	iled with the Florida Dent of State)	
19000050514	mes wan the range sept of take,	
(Document Number of C	Corporation (if known)	
ursuant to the provisions of section 607.1006, Florida Statutes, this $FI$ s Articles of Incorporation:	orida Profit Corporation adopts the follo	owing amendment(s) t
. If amending name, enter the new name of the corporation:		
ANETH L SILVA, P.A.		The new
ame must be distinguishable and contain the word "corporation," "colling," or Co.," or the designation "Corp." "Inc," or "Co". A perfectly chartered," "professional association," or the abbreviation "P.A."	npany," or "incorporated" or the abbre professional corporation name must co	viation "Corp.,"
. Enter new principal office address, if applicable: Principal office address <u>MUST BE A STREET ADDRESS</u> )		
Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)		202
Thinning unaress AST DE ATOST OF THE HOLD		
		<u> </u>
		<u>ω</u> _
<ul> <li>If amending the registered agent and/or registered office address: new registered agent and/or the new registered office address:</li> </ul>	s in Florida, enter the name of the	PH 10:
Name of New Registered Agent	· 	1,2
	t address)	
New Registered Office Address:	Florida	
u u	Ίη·)	(Zip Code)

Signature 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; 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: X Change	<u>PT</u>	<u>John Doe</u>	
_			
X Remove	$\underline{\mathbf{V}}$	Mike Jones	
<u>X</u> Add	$\underline{SV}$	Sally Smith	
Type of Action (Check One)	<u>Title</u>	<u>Name</u>	<u>Addres</u> s
1) Change			
Add			
Remove			
2) Change			
Add			
Remove 3 ) Change			
Add			
Remove			
4) Change			
Add			
Remove			
5) Change			
Add			
Remove			
6) Change			<u> </u>
Add			
Remove			

E. If amending or adding additional Articles, enter change(s) here: (Attach additional sheets, if necessary). (Be specific)
To provide real estate services under the Florida Board of Realtors. The services include assisting buyers and sellers with
purchasing or marketing property at the best rate. Providing solutions that will suit clients' needs given their financial abilitie
For this reason I need to change from Corp to P.A.
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)
N/A

	April 21, 2021	
The date of each amendment(s) ac	loption:	_, if other than the
date this document was signed.	1.21. 2021	
Apri Effective date <u>if applicable:</u>	1.21, 2021	
	(no more than 90 days after amendment file date)	
Note: If the date inserted in this b document's effective date on the De	lock does not meet the applicable statutory filing requirements, this date will partment of State's records.	not be listed as the
Adoption of Amendment(s)	( <u>CHECK ONE</u> )	
The amendment(s) was/were ado action was not required.	pted by the incorporators, or board of directors without shareholder action and	shareholder
☐ The amendment(s) was/were ado by the shareholders was/were su	pted by the shareholders. The number of votes cast for the amendment(s) fficient for approval.	
must be separately provided for	roved by the shareholders through voting groups. The following statement each voting group entitled to vote separately on the amendment(s):  for the amendment(s) was/were sufficient for approval	2021 1157 -3
<i>",</i>	(voting group)	لٰ ن
selected appoint	rector, president or other officer – if directors or officers have not been I, by an incorporator – if in the hands of a receiver, trustee, or other court ed fiduciary by that fiduciary)  JANETH L SILVA	PH 10: 42
	(Typed or printed name of person signing)	
	PRESIDENT	

(Title of person signing)