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COVER LETTER

TO: Amendment Section Division of Corporations

NAME OF CORPOR	ATION: ALAISA	DISTRIBUIDORA CORI		
DOCUMENT NUMB	ER:P19000	0050613		
The enclosed Articles of	of Amendment and fee are so	ubmitted for filing.		
Please return all correspondence concerning this matter to the following:				
	Guiller	rmo Pesant, Esq.		
-		Name of Contact Persor	1	
	GUILLERMO PESANT, P.A.			
	Firm/ Company			
	1313 Ponce de Le	on Blvd., Suite 301	1	
-	Address			
Coral Gables, FL 33134				
_	City/ State and Zip Code			
	Pesantg@bellsouth.net			
	=	sed for future annual report	notification)	
For further information concerning this matter, please call:				
Guillermo P		at (_305		
Name of Contact Person		Area Coo	le & Daytime Telephone Number	
Enclosed is a check for	the following amount made	payable to the Florida Depa	rtment 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 Copyis enclosed)	
Amen Divisi P.O. I	ng Address dment Section on of Corporations Box 6327 hassee, FL 32314	Amendr Division Clifton 2661 Ex	Address ment Section n of Corporations Building secutive Center Circle ssee. FL 32301	

Articles of Amendment to Articles of Incorporation of

ALAISA DISTRIBUIDORA CORP.

	ISTRIBUTIONA CORP.	
(Name of Corporati	on as currently filed with the Florie	la Dept. of State)
P19	000050613	
(Docum	nent Number of Corporation (if know	n)
Pursuant to the provisions of section 607.1006, Floridates Articles of Incorporation:	a Statutes, this <i>Florida Profit Corpor</i>	ation adopts the following amendmen
A. If amending name, enter the new name of the co	arporation:	
The state of the co	<u> </u>	
name must be distinguishable and contain the wor "Corp.," "Inc.," or Co.," or the designation "Corpword "chartered," "professional association," or the B. Enter new principal office address, if applicable (Principal office address)	," "Inc," or "Co". A professional abbreviation "P.A."	corporation name must contain the
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BO D. If amending the registered agent and/or register new registered agent and/or the new registered	ed office address in Florida, enter t	he name of the
	one address.	
Name of New Registered Agent		
	(Florida sweet address)	
New Registered Office Address:	_	. Florida
	(City)	(Zip Code)
lew Registered Agent's Signature, if changing Reging hereby accept the appointment as registered agent.	istered Agent: I am familiar with and accept the obli	gations of the position.
Signo	ture of New Registered Agent, if char	nging

If amending the Officers and/or Directors, enter the title and name of each officer/director being removed and title, name, a	nd
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>	John Doe	
X Remove	<u>V</u>	Mike Jones	
	<u>sv</u>	Sally Smith	
Type of Action (Check One)	Title	<u>Name</u>	Address
1) Change	V,D	Carlos Valero	8103 NW 68 Street
X Add			Miami, FL 33166
Remove			
2) Change			
Add			
Remove			
3) Change			<u> </u>
Add			
Remove			
4) Change		_	
Add			
Remove			
5) Change			
Add			-
Remove			
<u> </u>			
6) Change			<u>. </u>
Add			
Remove			

	(Be specific)
	
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Company of the contract of the	NANDE, FECIASSINGATION, OF CANCENATION OF ISSUED SHAFES
f an amendment provides for an exch	endment if not contained in the amendment itself:
f an amendment provides for an exch provisions for implementing the ame (if not applicable, indicate N/A)	endment if not contained in the amendment itself:
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The date of each amendment(s) adoption:	, if other than the
Effective date <u>if applicable</u> :	
(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 document's effective date on the Department of State's records.	e will not be listed as the
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. The following statemen must be separately provided for each voting group entitled to vote separately on the amendment(s):	11
"The number of votes cast for the amendment(s) was/were sufficient for approval	
by	
(voting 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.	
Dated August 13, 2019	
Signature (By a director, president or other officer – if directors or officers have not been selected, by an incorporator – if in the hands of a receiver, trustee, or other court appointed fiduciary by that fiduciary)	
Byron E. Keeler	
(Typed or printed name of person signing)	
Director	

(Title of person signing)