## P190000 53801

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## **COVER LETTER**

TO: Amendment Section Division of Corporations

NAME OF CO	ORPORATION: FALEO PILGRIM	M, INC	
	NUMBER:		
	rticles of Amendment and fee are s	submitted for filing.	
Please return all	d correspondence concerning this m	natter to the following:	
	Claudia E Reyes		
	-	Name of Contact Person	1
	CBS Financial CPA PA		
		Firm/ Company	
	6075 W Commercial Blvd		
		Address	
	Tamarac, FL 33319		
		City/ State and Zip Cod	e
	claudia@cbsfinancialcpa.co	em	
	E-mail address: (to be	used for future annual report	notification)
	rmation concerning this matter, ple		724 4141
Claudia E Reye		at (954	724-4141
	Name of Contact Person	Area Co	de & Daytime Telephone Number
Enclosed is a ch	heck for the following amount made	e payable to the Florida Dep	artment of State:
S35 Filing	Fee S43.75 Filing Fee & Certificate of Status	☐S43.75 Filing Fee & Certified Copy (Additional copy is enclosed)	☐\$52.50 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	Amend Division The Co 2415	Address Iment Section on of Corporations Tentre of Tallahassee N. Monroe Street, Suite 810 assee, FL 32303

## Articles of Amendment to Articles of Incorporation of

FALEO PIL GRIM INC.

FALEO FILORIMI INC		
	currently filed with the Florida Dep	pt. of State)
P19000053807		
(Document N	Sumber of Corporation (if known)	
Pursuant to the provisions of section 607.1006, Florida Statuits Articles of Incorporation:	utes, this Florida Profit Corporation	adopts the following amendment(s) to
A. If amending name, enter the new name of the corpor	ation:	
FALCO PILGRIM, INC		The new
name must be distinguishable and contain the word "corpord" lnc.," or Co.," or the designation "Corp.," "Inc.," or "chartered," "professional association," or the abbreviation	"Co". A professional corporation	
B. Enter new principal office address, if applicable:	N/A	
(Principal office address MUST BE A STREET ADDRES	<u></u>	
		2020
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)	N/A	,
		<del>p</del>
		<u>ښ</u>
		<del></del>
D. If amending the registered agent and/or registered of new registered agent and/or the new registered office		ame of the
Ν/Δ	<del></del>	
Name of New Registered Agent		
	Florida street address)	
New Registered Office Address:	, pr	, Florida
	(City)	(Zip Code)
New Registered Agent's Signature, if changing Registere	ed Agent:	
I hereby accept the appointment as registered agent. I am	familiar with and accept the obligation	ons of the position.
Sionature	of New Registered Agent, if changing	
•	-y	•
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>	John Do	e		
X Remove	<u>V</u>	Mike Joi	<u>nes</u>		
X Add	<u>SV</u>	Sally Sn	<u>nith</u>		
Type of Action (Check One)	Title		Name		Address
1) Change		_		<u> </u>	
Add					
Remove				-	
2) Change		_			<del></del> -
Add					
Remove Change		_			
Add					
Remove					
4) Change					
Add					
Remove					
5) Change		_			
Add					
Remove				,	
6) Change		_			
Add					
Remove					

E. If amending or adding additional Articles, enter cha (Attach additional sheets, if necessary). (Be specific)	nge(s) here:
N/A	
4	
	<u> </u>
F. If an amendment provides for an exchange, reclassit	fication, or cancellation of issued shares,
provisions for implementing the amendment if not	contained in the amendment itself:
(if not applicable, indicate N/A)	
<del></del>	<del></del>

	06/16/2020	
The date of each amendment date this document was signed		, if other th
1266 addered de Austria and Carabilia.	06/16/2020	
Effective date if applicable:	(no more than 9	0 days after amendment file date)
	his block does not meet the applicate the Department of State's records.	cable statutory filing requirements, this date will not be listed
Adoption of Amendment(s)	( <u>CHECK ONE</u> )	
The amendment(s) was/we action was not required.	e adopted by the incorporators, or	board of directors without shareholder action and shareholder
• •	re adopted by the shareholders. There sufficient for approval.	e number of votes cast for the amendment(s)
		ough voting groups. The following statement vote separately on the amendment(s):
"The number of vote	cast for the amendment(s) was/we	re sufficient for approval
by		
	(voting group)	
06/16	2020	
Dated	M. D.C	
		cer – if directors or officers have not been ne hands of a receiver, trustee, or other court
	UGAS CARRILLO, CARLO	OS .
	(Typed or printed	name of person signing)
	PVTD	
	(Title of person si	ening)

the

the