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## **COVER LETTER**

**TO:** Amendment Section Division of Corporations

NAME OF CORP	ORATION: ANNIE PELAEZ	PA			
	MBER: P19000057232				
The enclosed Artic	les of Amendment and fee are su	bmitted for filing.			
Please return all co	rrespondence concerning this ma	itter to the following:			
	Anna Marie Pelaez				
	Name of Contact Person				
		Firm/ Company	<del></del>		
	335 NE 28th Rd				
		Address			
	Boca Raton, FL 33431				
		City/ State and Zip Cod	e		
	anniep335@bellsouth.net				
	E-mail address: (to be us	sed for future annual report	notification)		
<sup>2</sup> or further informa	tion concerning this matter, pleas	se call:			
Annie Pelaez		561 at (	) 703-6800 de & Daytime Telephone Number		
Nan	ne of Contact Person	Area Co	de & Daytime Telephone Number		
Enclosed is a check	for the following amount made	payable to the Florida Depa	artment of State:		
S35 Filing Fee	S43.75 Filing Fee & Certificate of Status	□\$43.75 Filing Fee & Certified Copy (Additional copy is enclosed)	S52.50 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 Divisio The Co	Address Iment Section on of Corporations entre of Tallahassee N. Monroe Street, Suite 810		

Tallahassee, FL 32303

## Articles of Amendment to Articles of Incorporation of

to

ANNIE PELAEZ PA		
(Name of Corporatio	on as currently filed with the F	lorida Dept. of State)
P19000057232		200
(Docum	ent Number of Corporation (if k	nown) 2024 DEC 27 AH 11: 43
Pursuant to the provisions of section 607.1006, Florida its Articles of Incorporation:	Statutes, this Florida Profit Con	rporution adopts the following amendment(s)
A. If amending name, enter the new name of the co		
ANNA MARIE PELAEZ PA		The new
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 professional con	orporated" or the abbreviation "Corp.," rporation name must contain the word
B. Enter new principal office address, if applicable:		
(Principal office address <u>MUST BE A STREET ADD</u>	<u>RESS</u> )	
C. Enter new mailing address, if applicable:		
(Mailing address <u>MAY BE A POST OFFICE BOY</u>	<u> </u>	
D. If amending the registered agent and/or registered new registered agent and/or the new registered of		nter the name of the
new registered agent and/or the new registered of	mice address.	
Name of New Registered Agent		
	(Florida street address)	
New Registered Office Address:	18/88	Florida
	(City)	(Zip Code)
New Registered Agent's Signature, if changing Regi- I hereby accept the appointment as registered agent.—I		e obligations of the position.
. , , , ,	, , , , , , , , , , , , , , , , , , , ,	

Signature of New Registered Agent, if changing

## Check if applicable

 $\Box$  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.

X Change	<u>PT</u>	<u>John Do</u>	<u>v</u>		
X Remove	$\underline{V}$	Mike Jor	<u>nes</u>		
X Add	<u>SV</u>	Sally Sn	<u>uith</u>		
Type of Action (Check One)	<u>Title</u>		<u>Name</u>		<u>Addres</u> s
1) Change		_		<u>.</u>	
Add					
Remove					
2) Change	<del></del>	_			
Add					n -
Remove 3 ) Change		_			
Add					<u> </u>
Remove					
4) Change		<b></b>			- 50
Add					
Remove					
5) Change		_			
Add					
Remove					<u> </u>
6) Change		_			
Add					
Damara					

If amending or adding additional Arti Attach additional sheets, if necessary).	(Be specific)	_	
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f an amendment provides for an exch	anna raelaccification as	concollation of icenad	charac
provisions for implementing the amer	ange, recrassification, or	in the amendment itee	16.
(if not applicable, indicate N/A)	idilicit it not contained	in the amendment rise	<u></u>
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The date of each amendment(s) adoption	ption:	, if other than the
date this document was signed.		
Effective date if applicable:		
	(no more than 90 days after amendment file do	ate)
Note: If the date inserted in this bloc document's effective date on the Depa	ck does not meet the applicable statutory filing requirement of State's records.	nents, this date will not be listed as the
Adoption of Amendment(s)	( <u>CHECK ONE</u> )	
The amendment(s) was/were adopte action was not required.	ed by the incorporators, or board of directors without shar	reholder action and shareholder
☐ The amendment(s) was/were adopted by the shareholders was/were suffi	ed by the shareholders. The number of votes cast for the cient for approval.	amendment(s)
	ved by the shareholders through voting groups. The folloch voting group entitled to vote separately on the amenda	
"The number of votes cast for	the amendment(s) was/were sufficient for approval	
by	(voting group)	
· -	(voting group)	
(By a directed, by a directed by a direc	etor, president or other officer of directors or officers has by an incorporator – if in the hands of a receiver, trustee, of tiduciary by that fiduciary)  ANNA MARIE PELAEZ  (Typed or printed name of person signing)	
	President	
	(Title of person signing)	