P19000058788

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TALLARASSEL FLÖRIDA

OCT 1 8 2019 S. YOUNG

COVER LETTER

TO: Amendment Section Division of Corporations

NAME OF CORPOR	RATION: LOSEJA CORP		
DOCUMENT NUME	BER: P19000058788		
	of Amendment and fee are su	bmitted for filing.	
Please return all corres	spondence concerning this ma	tter to the following:	
	GABRIELA SETRAKIAN		
		Name of Contact Person	<u> </u>
	ARGENTAX LLC		
		Firm/ Company	
	1241 CANARY ISLAND DE	₹	
		Address	
	WESTON, FL 33327		
		City/ State and Zip Cod	c
gabys	etrakian@gmail.com		
	E-mail address: (to be us	sed for future annual report	notification)
For further information	n concerning this matter, pleas		
Name of Contact Person		at (Area Co) de & Daytime Telephone Number
	r the following amount made		, ,
S35 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 Copy is enclosed)
Amo Divi P.O.	ling Address endment Section sion of Corporations Box 6327 ahassee, FL 32314	Amend Divisio Clifton 2661 E	Address Iment Section on of Corporations Building executive Center Circle assee, FL 32301

Articles of Amendment to Articles of Incorporation of

LOSEJA CORP	
· · · · · · · · · · · · · · · · · · ·	tly filed with the Florida Dept. of State)
P19000058788	
(Document Number	of Corporation (if known)
Pursuant to the provisions of section 607.1006, Florida Statutes, thi its Articles of Incorporation:	s Florida Profit Corporation adopts the following amenda
A. If amending name, enter the new name of the corporation:	
	The ne
name must be distinguishable and contain the word "corporati "Corp.," "Inc.," or Co.," or the designation "Corp." "Inc." or word "chartered." "professional association," or the abbreviation	"Co". A professional corporation name must contain the
B. Enter new principal office address, if applicable:	4010 S. Ocean Drive, Unit T-4008
(Principal office address MUST BE A STREET ADDRESS)	Hollywood, FI 33019
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)	Z (
<u> </u>	7
	ei -
D. If amending the registered agent and/or registered office ad-	dress in Florida, enter the name of the
new registered agent and/or the new registered office addre	555:
Name of New Registered Agent	
(Florida s	treet address)
New Registered Office Address:	, Florida
	(City) (Zip Code)
New Registered Agent's Signature, if changing Registered Agen	at:
I hereby accept the appointment as registered agent. I am familian	with and accept the obligations of the position.
Signature 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, no 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; CEC Executive Officer; CFO = Chief Financial Officer. If an officer/director holds more than one title, list the first letter of ea 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. 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 Mike Jones, V as Remove, and Sally Smith, SV as an Add.

Example: X Change	<u>PT</u>	John Do	<u>oe</u>	
X Remove	<u>v</u>	Mike Jo	ones .	
X Add	<u>sv</u>	Sally Sr	nith_	
Type of Action (Check One)	Title		<u>Name</u>	Address
1) Change		- -		
Add				
Remove				
2) Change	<u>. </u>			
Add				
Remove				
3) Change				
Add		_		.
Remove				
4) Change		_		· · · · · · · · · · · · · · · · · · ·
Add				
Remove				
51 (1)				
5) Change				
Add				
Remove				
6) Change		_		
Add				
Remove				

					
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	 	.			
f an amendment provides	for an exchange,	reclassification,	or cancellation of	issued shares,	
provisions for implement (if not applicable, indi	ing the amendmer	<u>it if not containe</u>	ed in the amendme	ent itself:	
		·			
					
				,	
		· · · · · · · · · · · · · · · · · · ·			

he date of each amendment	l(s) adoption:	if other than the
te this document was signed	1 .	
o a_s_set_condicable	09/14/2019	
Tective date <u>if applicable</u> :	(no more than 90 days after amendment file date)	1
ote: If the date inserted in seument's effective date on t	this block does not meet the applicable statutory filing requirements, this date will no the Department of State's records.	t be listed as th
doption of Amendment(s)	(<u>CHECK ONE</u>)	
by the shareholders was/w	ere adopted by the shareholders. The number of votes east for the amendment(s) were sufficient for approval.	1
The amendment(s) was/we must be separately provid	ere approved by the shareholders through voting groups. The following statement ded for each voting group entitled to vote separately on the amendment(s):	
"The number of vote	es east for the amendment(s) was/were sufficient for approval	1
by		
	(voting group)	
The amendment(s) was/wa action was not required.	ere adopted by the board of directors without shareholder action and shareholder	,
action was not required.	were adopted by the incorporators without shareholder action and shareholder	
	(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)	-
	RUBEN PILLADO VILLA	
	(Typed or printed name of person signing)	
	PRESIDENT :	
	(Title of person signing)	