P1900058890

(Req	uestor's Name)	
(Add	ress)	
(Add	ress)	
(City,	/State/Zip/Phone	· #)
PICK-UP	MAIT	MAIL
(Bus	iness Entity Nam	ne)
(Doc	ument Number)	
Certified Copies	Certificates	of Status
		
Special Instructions to F	iling Officer:	
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12905 SW 42 STREET Suite: 210 MIAMI, FL 33175 Phone: 305-444-4994

Email: filing@ecfsfiling.com

Office Use Only	•

CORPORATION NAME(S) & DOCUMENT NUMBERS(S):

(CORPORATE NAME)	(DOCUMENT #)
2. (CORPORATE NAME)	(DOCUMENT #)
3. (CORPORATE NAME)	(DOCUMENT #)
☐ Walk-In	Pick up time: Certified Co	ppy Certificate Of Status
New Filings	Pick up time: Certified Co Amendments Amendments	Other Filings
New Filings Profit	Amendments	Other Filings
New Filings	Amendments Amendments	Other Filings Annual Report

Examiners Initials	

Articles of Amendment to Articles of Incorporation of

(Name of Composition as ourse	ently filed with the Florida Dept. of State)
P19000058890	nty filed with the riorida trept. or state
	r of Corporation (if known)
· ·	his Florida Profit Corporation adopts the following amendment(s) t
A. If amending name, enter the new name of the corporation:	
name must be distinguishable and contain the word "corpora" "Corp.," "Inc.," or Co.," or the designation "Corp," "Inc.," or word "chartered," "professional association," or the abbreviation	r "Co". A professional corporation name must contain the
B. Enter new principal office address, if applicable: (Principal office address MUST BE A STREET ADDRESS)	2019
	76
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)	9
 If amending the registered agent and/or registered office as new registered agent and/or the new registered office addr 	
Name of New Registered Agent	
(Florida	ı street address)
New Registered Office Address:	, Florida
	(City) (Zip Code)
New Registered Agent's Signature, if changing Registered Age I hereby accept the appointment as registered agent. I am familia	ent: ar with and accept the obligations of the position.
Signature of New	w Registered Agent, if changing

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 Doc 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	
X Add	<u>sv</u>	Sally Smith	
Type of Action (Check One)	Title	<u>Name</u>	Address
1) XX Change	VP	Yaznel Barif Alsina Sarquez	8105 NW 105 AVE
Add			DORAL, FL 33178
Remove			
2) XX Change	P	Jonathan Antonio Hurtado Hidalgo	8105 NW 105 AVE
Add			DORAL, FL 33178
Remove			
3) XX Change	S	Edicson Gerardo Ramirez Perez	8105 NW 105 AVE
Add			DORAL, FL 33178
Remove			
4) Change			
Add			
Remove			
5) Change			
Add			
Remove			
6) Change			
Add			
Remove			

	(Be specific)			
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f an amendment provides for an exchi	ndment if not contain	ied in the amendment		
provisions for implementing the amer	ndment if not contain	ned in the amendment		
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provisions for implementing the amer	ndment if not contain	ed in the amendment		

	11/25/2019	
The date of each amendment(s) ad	option:	, if other than th
date this document was signed.		
Effective date <u>if applicable</u> :	(no more than 90 days after amendment file date)	
	(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 department of State's records.	ite will not be listed as th
Adoption of Amendment(s)	(CHECK ONE)	
☐ The amendment(s) was/were ado by the shareholders was/were su	pted by the shareholders. The number of votes cast for the amendment() Ticient for approval.	\$)
	roved by the shareholders through voting groups. The following stateme each voting group entitled to vote separately on the amendment(s):	ent
"The number of votes cast	for the amendment(s) was/were sufficient for approval	
by	(voting group)	
·	(voting group)	
action was not required.	pted by the board of directors without shareholder action and shareholde	ा
☐ The amendment(s) was/were ado action was not required.	pted by the incorporators without shareholder action and shareholder	
11/25/2019 Dated		
Signature	author Hortado.	
	rector, president or other officer - if directors or officers have not been	
	, by an incorporator - if in the hands of a receiver, trustee, or other cour	t
appoint	ed fiduciary by that fiduciary)	
	Jonathan Antonio Hurtado Hidalgo	
	(Typed or printed name of person signing)	
	VP	
	(Title of person signing)	