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COVER LETTER

TO: Amendment Section Division of Corporations

NAME OF CORPORATION: BALANCE MCB	O CORP	<u>.</u>		
DOCUMENT NUMBER: P19000061209				
The enclosed Articles of Amendment and fee are s	ubmitted for filing.			
Please return all correspondence concerning this m	atter to the following:			
BELLA LA ROSA GONZA	ALEZ			
	Name of Contact Person			
BALANCE MCBO CORP	BALANCE MCBO CORP			
	Firm/ Company			
8683 NW 109TH CT				
	Address			
DORAL, FL 33178				
	City/ State and Zip Code	<u> </u>		
JUAN@RSVTAX.COM				
E-mail address: (to be i	ised for future annual report noti	fication)		
	11.		Ś	23
For further information concerning this matter, ple	ase can:		Z EO	1123
BELLA LA ROSA GONZALEZ	at (305) 8	825 1770		2023 JUN 13
Name of Contact Person Area Code & Daytime Telephone Number		¿ Daytime Telephone Number		చ
Enclosed is a check for the following amount made	payable to the Florida Departme	ent of State:	m m on m	FH 2: 02
■ \$35 Filing Fee & Certificate of Status	Certified Copy (Additional copy is	S52.50 Filing Fee Certificate of Status Certified Copy (Additional Copy is enclosed)	FL	3: 02
Mailing Address Amendment Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314	The Centre 2415 N. M			

Articles of Amendment to Articles of Incorporation of

BALANCE MCBO CORP

BALANCE MUBO CORP		
\ <u></u>	as currently filed with the Flori	da Dept. of State)
P19000061209		
(Documen	nt Number of Corporation (if know	/n)
Pursuant to the provisions of section 607.1006, Florida S its Articles of Incorporation:	Statutes, this Florida Profit Corpor	ation adopts the following amendment(s
A. If amending name, enter the new name of the corp	poration:	
		The new
name must be distinguishable and contain the word "corp" Inc.," or Co.," or the designation "Corp," "Inc," c"chartered," "professional association," or the abbrevia	or "Co". A professional corpor	orated" or the abbreviation "Corp.," ation name must contain the word
B. Enter new principal office address, if applicable:		
(Principal office address <u>MUST_BE A STREET ADDR</u>	RESS)	₹ 2 <u>1</u>
		<u></u>
C. Enter new mailing address, if applicable:		芸芸 云
(Muiling address MAY BE A POST OFFICE BOX)		72
		TAT TAT: 02
		
D. If amending the registered agent and/or registered new registered agent and/or the new registered of		the name of the
•	are address.	
Name of New Registered Agent		
	(Florida street address)	
New Registered Office Address:		, Florida
	(City)	(Zip Code)
New Registered Agent's Signature, if changing Regist	tered Agent:	
I hereby accept the appointment as registered agent. I d	am familiar with and accept the ob	ligations of the position.
Signatu	ure of New Registered Agent, if cha	
· ·	,	
Check if applicable	7 0120 (11) (a) ES	
☐ The amendment(s) is/arc being filed pursuant to s. 60	7.0120 (11) (6), 1.3.	

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>	John Doc	
X Remove	<u>v</u>	Mike Jones	
X Add	<u>\$V</u>	Sally Smith	
Type of Action (Check One)	<u>Title</u>	<u>Name</u>	<u>Addres</u> s
1) Change	VP	SYXELA GONZALEZ	6982 CACHE WAY
X Add			JURUPA VALLEY, CA 91752
Remove			
2) Change			
Add			
Remove 3) Remove	 		
Add			
Remove			SECNELLA DA
4) Change			
Add			
Remove			
5) Change			
Add			
Remove			
6) Change			
Add			
Remove			

E. If amending or adding additional Articles, enter change(s) here: (Attach additional sheets, if necessary). (Be specific)		
		_
		
<u> </u>		
		_
		_
		
	G: , in	_ <u>5</u> 6
	TALLY TALLY	<u> </u>
F. If an amendment provides for an exchange, reclassification, or cancellation of issued shares,	59	2623 JUN 13
provisions for implementing the amendment if not contained in the amendment itself: (if not applicable, indicate N/A)	表記	رټ
THIS AMENDMENT PROVIDES FOR RECLASSIFICATION OF ISSUED SHARES.	がない。	P
THE NEW DISTRIBUTION OF ISSUED SHARES, FOLLOWS:		<u> </u> 2: 02
Bella La Rosa Gonzalez President 95%	n	 >>
Syxela Gonzalez Vice-President 5%		
		
 		_

* * * * * * * * * * * * * * * * * * *	June 1st, 2023	
The date of each amendment(s) a late this document was signed.	ndoption;	, 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 locument's effective date on the D	block does not meet the applicable statutory filing requirements, this date we partment of State's records.	rill not be listed as the
Adoption of Amendment(s)	(CHECK ONE)	
The amendment(s) was/were adaction was not required.	lopted by the incorporators, or board of directors without shareholder action a	nd shareholder
☐ The amendment(s) was/were ad by the shareholders was/were s	opted by the shareholders. The number of votes cast for the amendment(s) ufficient for approval.	
	proved by the shareholders through voting groups. The following statement reach voting group entitled to vote separately on the amendment(s):	
"The number of votes cas	t for the amendment(s) was/were sufficient for approval	
by		
,	(voting group)	
June 1st, 2 Dated	023	
selecte	director, president or other officer—if directors or officers have not been ed, by an incorporator – if in the hands of a receiver, trustee, or other court need fiduciary by that fiduciary)	
	BELLA LA ROSA GONZALEZ	2023 SEC
	(Typed or printed name of person signing)	
	PRESIDENT	
	(Title of person signing)	PH 2: 02 OF STATE