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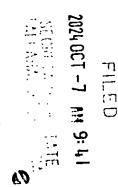
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10/07/24--01018--012 **43.7S



COVER LETTER

TO: Amendment Section Division of Corporations

Tallahassee, FL 32314

NAME OF CORPORA	TION: <u>Haris</u>	saga Coe	6
DOCUMENT NUMBI	R: <u>P19000</u>	0062231	
The enclosed Articles of	f Amendment and fee are su	bmitted for filing.	
Please return all corresp	ondence concerning this ma	iter to the following:	
-	Ilean Inigea	Name of Contact Person	Hiservicios
_	3750 W) <u> 16 Ave.</u> Address	#200
-	Hialeas	FL 3301 City/ State and Zip Cod	
-	E-mail address: (to be us	sed for future annual report	iscos @ Yako. cov
For further information	concerning this matter, pleas	se call;	
Name of	Contact Person	at (\ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \	de & Daytime Telephone Number
Enclosed is a check for	the following amount made	payable to the Florida Dep	artment of State:
□ \$35 Filing Fee	2943.75 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)
Amen Divisi	ng Address diment Section on of Corporations Box 6327	Amene Divisio	Address Iment Section on of Corporations entre of Tallahassee

2415 N. Monroe Street, Suite 810

Tallahassee, FL 32303

Articles of Amendment to Articles of Incorporation of

	tion as currently filed with the Florida Dept. of State)
P190000 623	<u> </u>
(Doct	ament Number of Corporation (if known)
Pursuant to the provisions of section 607,1006, Floridist Articles of Incorporation:	da Statutes, this Florida Profit Corporation adopts the following amendment(s) to
A. If amending name, enter the new name of the	corporation:
	The new
	corporation," "company," or "incorporated" or the abbreviation "Corp.," 2," or "Co". A professional corporation name must contain the word reviation "P.A."
B. Enter new principal office address, if applicab (Principal office address <u>MUST BE A STREET AL</u>	
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE B	10X) SEC. 200
D. If amending the registered agent and/or regist	tered office address in Florida, enter the name of the
new registered agent and/or the new registere	
Name of New Registered Agent	<u>— — — — — — — — — — — — — — — — — — — </u>
	(Florida street address)
New Registered Office Address:	, Florida
	·
New Registered Agent's Signature, if changing Re	egistered Agent:
I hereby accept the appointment as registered agent.	I am familiar with and accept the obligations of the position.
E:-	nature of New Registered Agent, if changing
Sig	manne of New Registerea Agent, if Changing

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)

Example:

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 Doc, PT as a Change, Mike Jones, V as Remove, and Sally Smith, SV as an Add.

X Change	<u>PT</u> <u>Joh</u>	nn Doe		
X Remove	<u>V</u> <u>Mil</u>	ke Jones		
X Add	<u>SV</u> <u>Sal</u>	ly Smith		
Type of Action (Check One)	Title	<u>Name</u>	<u>Addres</u> s	
1) Change Add	<u> Coo</u>	Alfredo De Jesa Quintero	os 20100 5 w 112 Miani Fl 33	
Remove				
2) Change				
Add				
Remove Change				
Add				
Remove				
4) Change				
Add				
Remove				
51 Change				
Add				
Remove				
6) Change				
Add				
Remove				

Attach additional sheets, if necessary). the specifics If an amendment provides for an exchange, reclassification, or cancellation of issued shares, provisions for implementing the amendment if not contained in the amendment itself: (if not applicable, indicate N/A)	
provisions for implementing the amendment if not contained in the amendment itself: (if not applicable, indicate N/A)	
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(if not applicable, indicate N/A)	
·	

The date of each amendment(s) adoption late this document was signed.	•	, if other than the
ane this document was signed.		
Effective date <u>if applicable</u> :	09/30/3024 (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 block of document's effective date on the Departu	does not meet the applicable statutory filing requirements, nem of State's records.	this date will not be listed as the
Adoption of Amendment(s)	(CHECK ONE)	
The amendment(s) was/were adopted action was not required.	by the incorporators, or board of directors without sharehol	der action and shareholder
☐ The amendment(s) was/were adopted by the shareholders was/were sufficie	by the shareholders. The number of votes east for the amer nt for approval.	idment(s)
	I by the shareholders through voting groups. The following voting group entitled to vote separately on the amendments	
"The number of votes east for th	e amendment(s) was/were sufficient for approval	
by		
	(voting group)	
selected, by	r. president or other officer – if directors or officers have no an incorporator – if in the hands of a receiver trustee, or other hands of a receiver trustee, or other hands of a receiver trustee.	
	(13) feet of france name of person signing)	
	<u>C</u> & 0	
	(Title of person signing)	