# P19000064457

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### COVER LETTER

TO: Amendment Section Division of Corporations

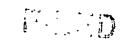
NAME OF CORPORA	ATION: TODO SEGUROS	CORPORATION	<u> </u>		
DOCUMENT NUMBE	P10000064457				
The enclosed Articles of	f Amendment and fee are su	bmitted for filing.			
Please return all corresp	ondence concerning this ma	tter to the following:			
		JOSELYN MARTINEZ			
-	Name of Contact Person				
	SUCCESS BUSINESS SOLUTIONS				
_	<u> </u>				
	11183 S ORANGE BLOSSOM TRAIL STE 204G				
_	Address				
_	ORLANDO FL. 32837				
		City/ State and Zip Code	2		
	IN	FO@SUCCESSORLANDO	D.COM		
_	E-mail address: (to be us	sed for future annual report	notification)		
For further information	concerning this matter, plea	se call:			
JOSELYN MARTINEZ		at ( <u>407</u>	7454684		
Name of Contact Person		Area Co	de & Daytime Telephone Number		
Enclosed is a check for	the following amount made	payable to the Florida Depa	ortnient of State:		
S35 Filing Fee	□\$43.75 Filing Fee & Certificate of Status	S43.75 Filing Fee & Certified Copy (Additional copy is enclosed)	S52.50 Filing Fee Certificate of Status Certified Copy (Additional Copy is enclosed)		
Mailing Address			Address		
Amendment Section		Amendment Section Division of Corporations			
Division of Corporations P.O. Box 6327		The Centre of Tallahassee			
Tallahassee, FL 32314		2415 N. Monroe Street, Suite 810			

## **Success Business Solution**

Tallahassee, FL 32303

(407) 745-4684 11183 S Orange Blossom Trail Ste 204G Orlando FL 32837

#### Articles of Amendment to Articles of Incorporation of



2022 DEC -1 AH 7: 25

## TODO SEGUROS CORPORATION

(Name	of Corporation as current		Dept. of State
	P1900006		
	(Document Number o	f Corporation (if known)	
Pursuant to the provisions of section 607 its Articles of Incorporation:	.1006, Florida Statutes, this	Florida Profit Corporatio	on adopts the following amendment(s) to
A. If amending name, enter the new n	ame of the corporation:		
		<u> </u>	The new
name must be distinguishable and contain "Inc.," or Co.," or the designation "C "chartered," "professional association,"	Corp." "Inc." or "Co". z	1 professional corporation	
B. Enter new principal office address,	if applicable:		
(Principal office address <u>MUST BE A S</u>			<del></del>
			<del></del>
C. Enter new mailing address, if appl	ionblas		
(Mailing address MAY BE A POST			
			<del></del>
D. If amending the registered agent at	nd/or registered office add	ress in Florida, enter the	name of the
new registered agent and/or the ne			
Name of New Registered Agent	MARIANELLA BARRIO	S DE DAVALOS	
Name of New Negistered Agent	2180 CENTRAL FLORID	A DADKWAY STE A7	
		vet address)	<del></del>
	ORLANDO	eer waressy	32837
New Registered Office Address:			, Florida
		(City)	(Zip Code)
New Registered Agent's Signature, if o	hanaina Daaistarad Aaant		
I hereby accept the appointment as regis			ttions of the position.
	. 62		
	///		
	[	egistered Agent, if changi	ing

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:

(Attoch 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 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>	Address
1) Change	Р	ELSIMAR DURANGO	3050 DYER BLVD SUITE 441
Add			KISSIMMEE FL 34741
X Remove			
2) X Change	Р	MARIANELLA BARRIOS DE DAV	2180 CENTRAL FLORIDA
Add			PARKWAY STE A7, ORLANDO
Remove 3 ) Change			FI. 32837
Add			
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 exch	ange, reclassification, or cancellation of issued shares,
provisions for implementing the amer	ndment if not contained in the amendment itself:
(if not applicable, indicate N/A)	

	/16/2022	
The date of each amendment(s) adoption:		, if other than the
date this document was signed.		
11/16/2022		
Effective date <u>if applicable</u> :	(no more than 90 days after amendment file date)	
	(no more than 90 days after amenament fite date)	
Note: If the date inserted in this block does no document's effective date on the Department of	of meet the applicable statutory filing requirements, this estate's records.	date will not be listed as the
Adoption of Amendment(s) (CH	ECK ONE)	
☐ The amendment(s) was/were adopted by the i action was not required.	incorporators, or board of directors without shareholder ac	tion and shareholder
■ The amendment(s) was/were adopted by the sby the shareholders was/were sufficient for a	shareholders. The number of votes east for the amendmer approval.	nt(s)
	e shareholders through voting groups. The following state group entitled to vote separately on the amendment(s):	ment
"The number of votes east for the amen	ndment(s) was/were sufficient for approval	
bv _	••	
	ing group)	
11/16/2022 Dated		
a. A	13	
Signature	ident or other officer - if directors or officers have not bee	
	orporator - if in the hands of a receiver, trustee, or other co	
	MARIANELLA BARRIOS DE DAVALOS	
	Typed or printed name of person signing)	
	PRESIDENT	

(Title of person signing)