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COVER LETTER

TO: Amendment Section Division of Corporations

NAME OF CORPORAT	TON:AGAD 0617	CORP		,
DOCUMENT NUMBER	:P1900006450	4		
The enclosed Articles of A	mendment and fee are su	bmitted for filing		
Please return all correspon	dence concerning this ma	itter to the followi	ng:	
		DIEGO R	OSERO	
		Name of Cont	act Person	1
		KAPITAL MA	NAGEM	ENT
		Firm/ Cor	npany	
		3585 NE 207	ST #800	0336
	-	Addre	·SS	
		AVENTURA,	FL 33180)
	· 	City/ State and	l Zip Cod	<u></u>
	DIEG	O@KAPITALMA	NAGEM	IFNTIIS
	E-mail address: (to be us		-	
For further information co				
	GO ROSERO ontact Person	at (561	543-7802
Name of Co	omact Person		Area Co	de & Daytime Telephone Number
Enclosed is a check for the	following amount made	payable to the Flo	rida Depa	artment of State:
\$35 Filing Fee	☐\$43.75 Filing Fee & Certificate of Status	S43.75 Filing Certified Cop (Additional co enclosed)	οÑ	\$52.50 Filing Fee Certificate of Status Certified Copy (Additional Copy is enclosed)
Amendn Division P.O. Box	Address nent Section of Corporations x 6327 see, FL 32314		Amend Divisio The Co 2415 N	Address ment Section on of Corporations entre of Tallahassee N. Monroe Street, Suite 810 ussee, FL 32303

Articles of Amendment to Articles of Incorporation of

AGAD 06	17 CORP	
(Name of Corporation as current	ly filed with the Florida Dept. of Stat	<u>e</u>)
P190000	064504	
(Document Number of	of Corporation (if known)	
Pursuant to the provisions of section 607,1006, Florida Statutes, this its Articles of Incorporation:	Florida Profit Corporation adopts the	following amendment(s) to
A. If amending name, enter the new name of the corporation:		
N/A		The new
name must be distinguishable and contain the word "corporation," "Inc.," or Co.," or the designation "Corp," "Inc," or "Co" "chartered," "professional association," or the abbreviation "P.A.	A professional corporation name mu	
B. Enter new principal office address, if applicable: (Principal office address <u>MUST BE A STREET ADDRESS</u>)	N/A	
		20
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)	N/A	19 NOV 26
		· · · · · · · · · · · · · · · · · · ·
D. If amending the registered agent and/or registered office add new registered agent and/or the new registered office address		ယ် မ
Name of New Registered Agent N/A		, ,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,
t.Y		
·	reet address)	
New Registered Office Address:	(City) Florida	(Zip Code)
New Registered Agent's Signature, if changing Registered Agent I hereby accept the appointment as registered agent. I am familiar		osition.
Signature of New I	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 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.

Example: 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	CEC	DIEGO ROSERO	3585 NE 207TH ST #800336
X_Add			AVENTURA, FL 33180
Remove			
2) Change			
Add			
Remove 3) Change			
Add			
Remove			
4) Change			
Add			
Remove			
5) Change			
Add			
Remove			
6) Change			
Add			
Remove			
		Page 2 of 4	
E. <u>If amending or addir</u> (Attach <i>additional shed</i> N/A	ng additi ets, if nec	ional Articles, enter change(s) here: cessary). (Be specific)	

. If an amendment provides for an exc provisions for implementing the ame (if not applicable, indicate N/A)	hange, reclassification, or cancellation of issued shares, endment if not contained in the amendment itself:	
provisions for implementing the ame (if not applicable, indicate N/A)	hange, reclassification, or cancellation of issued shares, endment if not contained in the amendment itself:	
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(no more than 90 days after amendment file date)

Note: If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as the document's effective date on the Department of State's records.

Adoption of Amendment(s)	(<u>CHECK ONE</u>)
The amendment(s) was/were add by the shareholders was/were su	opted by the shareholders. The number of votes cast for the amendment(s) ifficient for approval.
• •	proved by the shareholders through voting groups. The following statement each voting group entitled to vote separately on the amendment(s):
"The number of votes cast	for the amendment(s) was/were sufficient for approval
by	
	(voting group)
☐ The amendment(s) was/were add action was not required.	opted by the board of directors without shareholder action and shareholder
☐ The amendment(s) was/were add action was not required.	opted by the incorporators without shareholder action and shareholder
Dated	11/25/19
Signature	
	irector, president or other officer – if directors or officers have not been d. by apprecipe ator – if in the hands of a receiver, trustee, or other court
	led fidelicity by that fiduciary)
	ADOLFO GONZALEZ QUINTERO
	(Typed or printed name of person signing)
	PRESIDENT
	(Title of person signing)