

7190000 65 003

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP ☐ WAIT ☐ MAIL

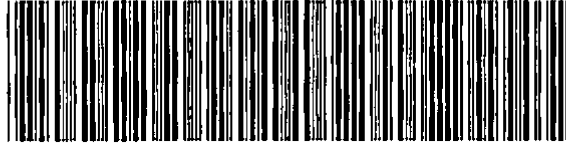
(Business Entity Name)

(Document Number)

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pecial Instructions to Filing Officer:

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2019 DEC -6 AM 8:39  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

Amend / CC  
CLIS

JAN 11 2020  
ALBRITTON

**COVER LETTER**

Amendment Section  
Division of Corporations

**NAME OF CORPORATION:** GUATEMALA ANTIGUA DEL SUR DE LA FLORIDA III INC

**DOCUMENT NUMBER:** P19000065003

enclosed *Articles of Amendment* and fee are submitted for filing.

Please return all correspondence concerning this matter to the following:

PEDRO ORNELAS

Name of Contact Person

Firm/ Company

12427 PECONIC COURT UNIT 1

Address

WELLINGTON, FLORIDA 33414

City/ State and Zip Code

southoceaninc@hotmail.com

E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

PEDRO ORNELAS

at ( 561 ) 719-4200

Name of Contact Person

Area Code & Daytime Telephone Number

Enclosed is a check for the following amount made payable to the Florida Department of State:

☐ \$35 Filing Fee

☐ \$43.75 Filing Fee &  
Certificate of Status

☐ \$43.75 Filing Fee &  
Certified Copy  
(Additional copy is  
enclosed)

☒ \$52.50 Filing Fee  
Certificate of Status  
Certified Copy  
(Additional Copy  
is enclosed)

**Mailing Address**

Amendment Section  
Division of Corporations  
P.O. Box 6327  
Tallahassee, FL 32314

**Street Address**

Amendment Section  
Division of Corporations  
The Centre of Tallahassee  
2415 N. Monroe Street, Suite 810  
Tallahassee, FL 32303

FFN-X  
OVER NIGHT

Articles of Amendment  
to  
Articles of Incorporation  
of

GUATEMALA ANTIGUA DEL SUR DE LA FLORIDA III INC

(Name of Corporation as currently filed with the Florida Dept. of State)

P19000065003

(Document Number of Corporation (if known))

uant to the provisions of section 607.1006, Florida Statutes, this **Florida Profit Corporation** adopts the following amendment(s) to  
articles of Incorporation:

**If amending name, enter the new name of the corporation:**

\_\_\_\_\_ The new  
ie must be distinguishable and contain the word "corporation," "company," or "incorporated" or the abbreviation "Corp.,"  
c.," or Co.," or the designation "Corp.," "Inc.," or "Co". A professional corporation name must contain the word  
artered," "professional association," or the abbreviation "P.A."

**Enter new principal office address, if applicable:**

incipal office address **MUST BE A STREET ADDRESS** )

**Enter new mailing address, if applicable:**

(Mailing address **MAY BE A POST OFFICE BOX**)

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TALLAHASSEE, FLORIDA

**If amending the registered agent and/or registered office address in Florida, enter the name of the  
new registered agent and/or the new registered office address:**

Name of New Registered Agent \_\_\_\_\_

\_\_\_\_\_  
(Florida street address)

New Registered Office Address: \_\_\_\_\_, Florida \_\_\_\_\_  
(City) (Zip Code)

**New Registered Agent's Signature, if changing Registered Agent:**

I hereby accept the appointment as registered agent. I am familiar with and accept the obligations of the position.

\_\_\_\_\_  
Signature of New Registered Agent, if changing

ending 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. For example, 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:

Change PT John Doe

Remove V Mike Jones

Add SV Sally Smith

Action	Title	Name	Address
Change	Tres	PEDRO ORNELAS	12427 PECONIC COURT UNIT 1
X Add			WELLINGTON, FLORIDA 33414
Remove			
Change			
Add			
Remove			
Change			
Add			
Remove			
Change			
Add			
Remove			
Change			
Add			
Remove			
Change			
Add			
Remove			

E. If amending or adding additional Articles, enter change(s) here:

(Attach additional sheets, if necessary). (Be specific)

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

tion of Amendment(s) **(CHECK ONE)**

re amendment(s) was/were adopted by the shareholders. The number of votes cast for the amendment(s)  
y the shareholders was/were sufficient for approval.

he amendment(s) was/were approved by the shareholders through voting groups. *The following statement  
ust be separately provided for each voting group entitled to vote separately on the amendment(s):*

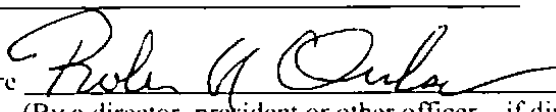
"The number of votes cast for the amendment(s) was/were sufficient for approval

by \_\_\_\_\_  
(voting group)

he amendment(s) was/were adopted by the board of directors without shareholder action and shareholder  
ction was not required.

he amendment(s) was/were adopted by the incorporators without shareholder action and shareholder  
ction was not required.

Dated NOVEMBER 2ND 2019

Signature   
(By a director, president or other officer – if directors or officers have not been  
selected, by an incorporator – if in the hands of a receiver, trustee, or other court  
appointed fiduciary by that fiduciary)

WELLINGTON, FLORIDA 33414

(Typed or printed name of person signing)

PEDRO ORNELAS, CORPORATE TREASURER

(Title of person signing)