## P19 (60068933

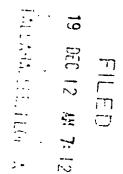
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(Address)					
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JAN 1 5 2020 S. YOUNG



## **COVER LETTER**

**D:** Amendment Section Division of Corporations

AME OF CORPORA	ATION: APSAVE CORP	<u> </u>				
OCUMENT NUMBE	R: P19000068933		<del>-</del>			
he enclosed Articles of	Amendment and fee are su	bmitted for filing.				
lease return all correspo	ondence concerning this ma	tter to the following:				
А	LEX PEDRO					
Name of Contact Person						
BR TAX CORP						
_		Firm/ Company				
5337 NE 17TH AVE						
Address						
POMPANO BEACH, FL 33064						
	<del></del>	City/ State and Zip Code	2			
contatal	ortax@gmail.com					
		sed for future annual report	notification)			
	is man address. (to be di	to round amount report	The state of the s			
For further information of	concerning this matter, pleas	se call:				
Alex Pedro		at ( 954	859 7900			
Name of	Contact Person	Area Co	de & Daytime Telephone Number			
Enclosed is a check for t	he following amount made	payable to the Florida Depa	irtment of State:			
■ \$35 Filing Fee	□S43.75 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)			
Ameno Divisio P.O. B	ng Address dment Section on of Corporations Box 6327 assee, FL 32314	Amend Divisio Clifton 2661 E	Address Iment Section on of Corporations Building Executive Center Circle assee, FL 32301			

## Articles of Amendment to Articles of Incorporation of

'E CORP.

(Name of Corporation as currently filed with the Florida Dept. of State) )68933 (Document Number of Corporation (if known) to the provisions of section 607,1006, Florida Statutes, this Florida Profit Corporation adopts the following amendment(s) to les of Incorporation: nending name, enter the new name of the corporation: ust be distinguishable and contain the word "corporation," "company," or "incorporated" or the abbreviation " "Inc.," or Co.," or the designation "Corp," "Inc," or "Co". A professional corporation name must contain the hartered," "professional association," or the abbreviation "P.A." 23378 SW 57TH AVE UNIT #201 r new principal office address, if applicable: al office address MUST BE A STREET ADDRESS ) BOCA RATON, FL 33428 - 7706 er new mailing address, if applicable: iling address MAY BE A POST OFFICE BOX) nending the registered agent and/or registered office address in Florida, enter the name of the registered agent and/or the new registered office address: Name of New Registered Agent (Florida street address) New Registered Office Address: (City) gistered Agent's Signature, if changing Registered Agent: accept the appointment as registered agent. I am familiar with and accept the obligations of the position. Signature of New Registered Agent, if changing

f amending the Officers and/or Directors, enter the title and name of each officer/director being removed and title, name, and iddress of each Officer and/or Director being added:

Attach additional sheets, if necessary)

Yease note the officer/director title by the first letter of the office title:

? = 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 weld. President, Treasurer, Director would be PTD.

Thanges 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.

		ly Smith, SV as an Add.		
X Change	<u>PT</u>	John Doe		
X Remove	<u>V</u>	Mike Jones		
X Add	<u>sv</u>	Sally Smith		
<u>Pype of Action</u> Check One)	<u>Title</u>	<u>Name</u>		<u>Addres</u> s
) Change	<del></del>	<del></del>		
Add				
Remove				
2) Change		_		
Add				
Remove			1	
3 ) Change		_		
Add				
Remove				
1) Change		<del></del>		
Add				
Remove				
5) Change				
Add				
Remove				
) Change		_		
Add				
Remove				

•	additional sheets, if necessary). (Be specific)
	<del></del>
n ar	nendment provides for an exchange, reclassification, or cancellation of issued shares,
OVIS	ons for implementing the amendment if not contained in the amendment itself:
(if	not applicable, indicate N/A)

e of each amendment(s) adoption:, if other	than the
document was signed.	
e date <u>if applicable</u> :  (no more than 90 days after amendment file date)	
(no more than 90 days after amendment file date)	
If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listent's effective date on the Department of State's records.	ed as the
ion of Amendment(s) ( <u>CHECK ONE</u> )	
amendment(s) was/were adopted by the shareholders. The number of votes cast for the amendment(s) the shareholders was/were sufficient for approval.	
e 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 ation was not required.	
The amendment(s) was/were adopted by the incorporators without shareholder action and shareholder action was not required.	
Dated 12 10 19	
Signature (By a director, president or other officer – if directors or officers have not been selected, by an incorporator – it in the hands of a receiver, trustee, or other court appointed fiduciary by that fiduciary)	
-P	
(Typed or printed name of person signing)	
RUFINO DE LIMA, HERICA	

(Title of person signing)