P190000 69156

(Re	equestor's Name)	
(Ac	ddress)	
(Ad	ddress)	
(Ci	ity/State/Zip/Phone	e #)
PICK-UP	☐ WAIT	MAIL
(Bo	usiness Entity Nan	ne)
(D	ocument Number)	
Certified Copies	Certificates	of Status
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COVER LETTER

TO: Amendment Section Division of Corporations

NAME OF CO	RPORATION: KOVERSEA, INC			
DOCUMENT N	UMBER: P19000069156			
The enclosed Ari	icles of Amendment and fee are su	abmitted for filing.		
Please return all	correspondence concerning this ma	atter to the following:		
	RAFAEL ARISTIZABAL			
		Name of Contact Person)	
	KOVERSEA, INC			
		Firm/ Company		
	2681 N FLAMINGO ROAD	#1607		
	SUNRISE, FL. 33323			
	City/ State and Zip Code		2	
	RALPHARISTIZABAL@GMAIL.COM			
	E-mail address: (to be u	sed for future annual report	notification)	
For further infort	nation concerning this matter, plea	se call:		20
RAFAEL ARIST	TIZABAL	at (³⁰⁵	490-3011	77. 122.
N	ame of Contact Person		de & Daytime Telephone Number	<u> </u>
Enclosed is a che	ck for the following amount made	payable to the Florida Depa	artment of State:	:1 54
S35 Filing F	ee \$ \$43.75 Filing Fee & Certificate of Status	□\$43.75 Filing Fee & Certified Copy (Additional copy is enclosed)	S52.50 Filing Fee Certificate of Status Certified Copy (Additional Copy is enclosed)	ប

Articles of Amendment to Articles of Incorporation σf

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KOVERSEA, INC	
(Name of Corporation as currently filed with the Florida Dept. of State)	
19000069156	
(Document Number of Corporation (if known)	····
Pursuant to the provisions of section 607.1006, Florida Statutes, this <i>Florida Profit Corporation</i> adopts the follo its Articles of Incorporation:	wing amendment(s)
A. If amending name, enter the new name of the corporation:	
name must be distinguishable and contain the word "corporation," "company," or "incorporated" or the abbreve "Inc.," or Co.," or the designation "Corp," "Inc." or "Co". A professional corporation name must con "chartered," "professional association," or the abbreviation "P.A."	The new iation "Corp.," ntain the word
B. Enter new principal office address, if applicable: (Principal office address MUST BE A STREET ADDRESS)	
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)	20 JUN 19
D. 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:	08808 08808 08808
Name of New Registered Agent	ATTIONS
(Florida street address)	
New Registered Office Address:, Florida	
	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 positions.	ว ท .
Signature of New Registered 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)

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 Doe	
X Remove	$\underline{\mathbf{v}}$	Mike Jones	
X Add	<u>sv</u>	Sally Smith	
Type of Action (Check One)	<u>Title</u>	<u>Name</u>	Address
1) Change	<u>coo</u>	ALBERTI ORTIZ	4109 SW 24 STREET # N
Add			FT. LAUDERDALE, FL 33317
X Remove			
2) Change		_	
Add			
Remove 3) Change			
Add			
Remove			
4) Change			
Add			
Remove			
5) Change			
Add			
Remove			
6) Change			
Add			
Remove			

	ticles, enter change(s) here: (Be specific)
	
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rovisions for implementing the amer	nange, reclassification, or cancellation of issued shares, endment if not contained in the amendment itself:

6/15/2020
The date of each amendment(s) adoption:, if other than date this document was signed.
Effective date if applicable:
(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 document's effective date on the Department of State's records.
Adoption of Amendment(s) (CHECK ONE)
■ The amendment(s) was/were adopted by the incorporators, or board of directors without shareholder action and shareholder action was not required.
The amendment(s) was/were adopted by the shareholders. The number of votes cast for the amendment(s) by the shareholders was/were sufficient for approval.
☐ The amendment(s) was/were approved by the shareholders through voting groups. The following statement must 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)
Dated
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)
Rafael Aristizabal
(Typed or printed name of person signing)
President
(Title of person signing)