P19000071747

_		
(Re	questor's Name)	
(Ad	dress)	
(Ad	dress)	
(Cit	y/State/Zip/Phone	e #)
_		
PICK-UP	☐ WAIT	MAIL
(Bu	siness Entity Nar	ne)
(Do	cument Number)	
Certified Copies	Certificates	s of Status
	_	
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2022 SEP 12 All 7: 05

DEC 1/1 2022 S. PRATHI:

COVER LETTER

TO: Amendment Section Division of Corporations

.

NAME OF COR	PORATION: JAIMES EQUIPM	ENT CORP	
	JMBER: P19000071747		
The enclosed Arti	cles of Amendment and fee are su	bmitted for filing.	
Please return all o	orrespondence concerning this ma	itter to the following:	
	VICTOR LAGO EXPOSITO)	
		Name of Contact Person	
	JAIMES EQUIPMENT COR	RP.	
		Firm/ Company	<u> </u>
	1156 SINBAD AVE		
		Address	
	OPALOCKA FL 33054		
		City/ State and Zip Code	2
	E-mail address: (to be u	sed for future annual report	notification)
		•	
For further inforn	nation concerning this matter, plea	se call:	
VICTOR LAGO	EXPOSITO	at (3158268
Na	une of Contact Person	Area Co	de & Daytime Telephone Number
Enclosed is a che	ck for the following amount made	payable to the Florida Depa	artment of State:
S35 Filing Fo	ce ☐\$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 Tallahassec, FL 32314	Amend Division The C 2415 i	Address Ilment Section on of Corporations entre of Tallahassee N. Monroe Street, Suite 810 nssee, FL 32303

•	Articles of Amendment	7	2022
,	to Articles of Incorporation	•	2 3
	of	- .	<u>⊏</u> ;
JAIMES EQUIPMENT CORP			12
(Name of Corp	oration as currently filed with the Florida Dept. of State)	71	<u> </u>
P1900071747		7.6	1
(1	Document Number of Corporation (if known)	- .	S
Pursuant to the provisions of section 607.1006, Fits Articles of Incorporation:	Florida Statutes, this Florida Profit Corporation adopts the following	owing ame	ndment(s) to
A. If amending name, enter the new name of	the corporation:		
			new
name must be distinguishable and contain the wo "Inc.," or Co.," or the designation "Corp," "chartered," "professional association," or the	rd "corporation," "company," or "incorporated" or the abbre "Inc," or "Co". A professional corporation name must cabbreviation "P.A."	viation "Co ontain the	rp.," word
B. Enter new principal office address, if appl (Principal office address MUST BE A STREET			_
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFIC	CE BOX)		
D. If amending the registered agent and/or renew registered agent and/or the new regis	egistered office address in Florida, enter the name of the tered office address:		
Name of New Registered Agent			
	(Florida street address)		
New Registered Office Address:	, Florida	<u></u>	
	(City)	(Zip Code)	
New Registered Agent's Signature, if changing	ng Pegistered Agent		
I hereby accept the appointment as registered as	gent.—I am familiar with and accept the obligations of the posi	tion.	
	Cincolana of Many Burgistanual County of Abananian		
	Signature of New Registered Agent, if changing		
Check if applicable			
☐ The amendment(s) is/are being tiled pursuan	t 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)

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 Doe			
X Remove	<u>V</u>	Mike Jones			
X Add	<u>SV</u>	Sally Smith			
Type of Action (Check One)	<u>Title</u>	<u>Name</u>		<u>Addres</u> s	
1) Change	VP	OMAR JA	AIME PEREZ	1156 SINBAD AVE	
X Add				OPALOCKA FL 33054	-
Remove					-
2) Change					-
Add					_
Remove Change		_			-
Add					-
Remove					-
4) Change					-
Add					_
Remove					-
5) Change					-
Add					-
Remove					
6) Change					
Add					
Remove					

y mochany /.	rticles, enter change(s) here: . (Be specific)
	
f an amendment provides for an exc	change, reclassification, or cancellation of issued shares,
provisions for implementing the am	nendment if not contained in the amendment itself:
(if not applicable, indicate N/A)	

•

	ption:	, if other than the
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 blo document's effective date on the Depa	ck does not meet the applicable statutory filing requirements, this dat artment of State's records.	e will not be listed as the
Adoption of Amendment(s)	(<u>CHECK ONE</u>)	
■ The amendment(s) was/were adopt action was not required.	ted by the incorporators, or board of directors without shareholder actio	on and shareholder
☐ The amendment(s) was/were adop by the shareholders was/were suff	ted by the shareholders. The number of votes east for the amendment(s icient for approval.	5)
	oved by the shareholders through voting groups. The following stateme ach voting group entitled to vote separately on the amendment(s):	2022 'ALL
"The number of votes cast fo	r the amendment(s) was/were sufficient for approval	12 SEP
by	<u> </u>	·
	(voting group)	2 Ai:
08/30/2022		i 1: (
Dated	·	* 05
Signature		∷ in
(By a dire selected,	ector, president or other officer – if directors or officers have not been by an incorporator – if in the hands of a receiver, trustee, or other court d tiduciary by that fiduciary)	t
V	TICTOR LAGO EXPOSITO	
_	(Typed or printed name of person signing)	
P	RESIDENT	
-	(Title of person signing)	