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COVER LETTER

TO: Amendment Section Division of Corporations

Tallahassee, FL 32314

NAME OF CORPORA	TION:		SCORP			
DOCUMENT NUMBE	R:	0 190000 73	1819			
The enclosed Articles of	Amendment and fee are su	bmitted for filing.				
Please return all correspo	ndence concerning this ma	tter to the following:				
	T	ANIA RAM	11812			
-		Name of Contact Persor	1			
	REBECCA'S CORP Firm/ Company					
_	11435 SW 149 CT					
	191AU1, FL 33196					
		City/ State and Zip Code	•			
_	E-mail address: (to be us	ecca3 Q ma ed for future semial report	il. LOW notification)			
For further information c	oncerning this matter, pleas	se call:				
MARIA Name of C	BECERLA Contact Person	at (7 8 6) 39-5673 de & Daytime Telephone Number			
Enclosed is a check for th	ne following amount made	payable to the Florida Depa	riment 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 Street Address					
	ment Section n of Corporations	Amendment Section Division of Corporations				
	ox 6327	The Centre of Tallahassee				

2415 N. Monroe Street, Suite 810

Tallahassee, FL 32303

Articles of Amendment to Articles of Incorporation

REBECO	CA'S CORP
(Name of Corporation as curre	ntly filed with the Florida Dept. of State)
P19	000073819
	r of Corporation (if known)
Pursuant to the provisions of section 607.1006, Florida Statutes, the its Articles of Incorporation:	is Florida Profit Corporation adopts the following amendment(s) t
A. If amending name, enter the new name of the corporation:	
	The
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 professional corporation name must contain the word
B. Enter new principal office address, if applicable: (Principal office address <u>MUST BE A STREET ADDRESS</u>)	
	022
C. Enter new mailing address, if applicable:	
(Mailing address MAY BE A POST OFFICE BOX)	
	The second secon
D. If amending the registered agent and/or registered office at	
new registered agent and/or the new registered office address	<u> 1885:</u>
Name of New Registered Agent	
(Florida	street address)
New Registered Office Address:	. Florida
	(City) (Zip Code)
New Dogistand Acoustic Company of the start Design of Acoustic Company	
New Registered Agent's Signature, if changing Registered Age I hereby accept the appointment as registered agent. I am familia	nt: r with and accept the obligations of the position.
Cim zam - CV	Registered Agent, if changing
Signature of New	regisierea Agent, ij changing
Check if applicable	
☐ The amendment(s) is/are being filed pursuant to s. 607.0120 (1)	I) (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 D	<u>oc</u>	
X Remove	<u>v</u>	Mike Jo	ones	
_X Add	<u>sv</u>	Sally S	<u>mith</u>	
Type of Action (Check One)	Title		Name	<u>Addres</u> s
1)Change		_	FRANCISCO AMBRIZ	11435 SW149 CT
X Add				MIAMI, FL 33196
Remove				
2) Change				
Add				
Remove 3)Change				
Add				
Remove				
4) Change				
Add				
Remove				No. The second design of the s
5) Change				
Add				
Remove				
6)Change				
Add				
Remove				

If amending or adding additional Articl	(D
Attach additional sheets, if necessary).	(ве ѕресілс)
NIA	
~ /~ / / /	
	
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lf on amondarant against a for a second	
urovisions for implementing the emen	nge, reclassification, or cancellation of issued shares, Iment if not contained in the amendment itself:
(if not applicable, indicate NA)	iment it not contained in the amendment usen.
NIA	

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The date of each amendment(s) adoption	: <u>2/3/2020</u>	, if other than the
late this document was signed.		
Effective date if applicable:	2/3/2020	
	(no more than 90 days after amendment fi	le date)
Note: If the date inserted in this block do document's effective date on the Departme	nes not meet the applicable statutory filing requint of State's records.	irements, this date will not be listed as the
Adoption of Amendment(s)	(CHECK ONE)	
Xi The amendment(s) was/were adopted by action was not required.	the incorporators, or board of directors without	shareholder action and shareholder
☐ The amendment(s) was/were adopted by by the shareholders was/were sufficient	the shareholders. The number of votes cast for for approval.	the amendment(s)
	by the shareholders through voting groups. The joing group entitled to vote separately on the am	
"The number of votes cast for the	amendment(s) was/were sufficient for approval	
by		
	(voting group)	
Dated $\frac{3}{3}$	020	
Dated ST 1/2	1	
Signature		
(By a director,	president or other officer - if directors or officer	
	incorporator – if in the hands of a receiver, trust ciary by that fiduciary)	lee, or other court
appointed that	• •	
	TANIA R AMBRIZ (Typed or printed name of person signing)	
	(Typed or printed name of person signing)	
	ρ	
	(Title of person signing)	