P19000073201

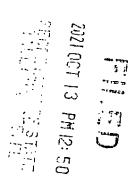
(Re	equestor's Name)	
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PICK-UP	☐ WAIT	MAIL
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Special Instructions to	Filing Officer:	
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A. Butler

COVER LETTER

Division of Corporations				
NAME OF CORPORATION: SIGA LA VACA	A. CORP			
DOCUMENT NUMBER: P19000073201				
The enclosed Articles of Amendment and fee are	submitted for filing.			
Please return all correspondence concerning this r	natter to the following:			
AMAL K NEMER IRCHE	ED			
	Name of Contact Person	1		
	Firm/ Company			
50 BISCAYNE BLVD AP	T 3511			
	Address			
MIAMI, FL 33132				
	City/ State and Zip Code	<u>:</u>		
ALL.FLORIDACCOUNT	-			
E-mail address: (to be	used for future annual report	notification)		
For further information concerning this matter, ple	ease call:			
AMAL K NEMER IRCHED	at (⁷⁸⁶	282-3226		
Name of Contact Person		de & Daytime Telephone Number		
Enclosed is a check for the following amount mac	le payable to the Florida Depa	irtment of State:		
☐ \$35 Filing Fee ☐ \$43.75 Filing Fee & Certificate of Status	•	S52.50 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	Amend Divisio The Co 2415 N	Address ment Section n of Corporations entre of Tallahassee J. Monroe Street, Suite 810 ssee, FL 32303		

Articles of Amendment to Articles of Incorporation of

les of Incorporation of

(Name of Corporation	on as currently filed with the Florida	Dept/of State) 13 PM 12. FO
19000073201	-	Debisos Pratici 13 PM 15: 20
(Docum	nent Number of Corporation (if known)	E, I
ursuant to the provisions of section 607,1006, Florida s Articles of Incorporation:	Statutes, this Florida Profit Corporation	
. If amending name, enter the new name of the co	orporation:	
		The new
ame must be distinguishable and contain the word "co Inc.," or Co.," or the designation "Corp," "Inc," chartered," "professional association," or the abbre	or "Co". A professional corporation	sted" or the abbreviation "Corp.,"
. Enter new principal office address, if applicable: Principal office address <u>MUST BE A STREET ADD</u>		
		· · · · · · · · · · · · · · · · · · ·
. Enter new mailing address, if applicable:		
(Mailing address <u>MAY BE A POST OFFICE BO</u>	<u>X</u>)	
		
		e name of the
. If amending the registered agent and/or register new registered agent and/or the new registered of		e name of the
		e name of the
new registered agent and/or the new registered of		e name of the
new registered agent and/or the new registered of	office address:	e name of the

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.

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	Р	JUNADA AL CHAMI DE NEMER	50 BISCAYNE BLVD APT 3511
Add			MIAMI, FL 33132
X Remove			
2) Change	VP	CESAR Z NEMER RECHID	50 BISCAYNE BLVD APT 3511
Add			MIAMI, FL 33132
X Remove Change	P	AMAL K NEMER IRCHED	50 BISCAYNE BLVD APT 3511
X Add			MIAMI, FL 33132
Remove			
4) Change			
Add			
Remove			
5) Change			
Add			
Remove			
6) Change			
Add			
Damaya			

•	If amending or adding additional Articles, enter change(s) here:
(Attach additional sheets, if necessary). (Be specific)
_	
_	
_	
_	
_	If an amendment provides for an exchange, reclassification, or cancellation of issued shares,
	provisions for implementing the amendment if not contained in the amendment itself:
	(if not applicable, indicate N/A)
_	
_	· · · · · · · · · · · · · · · · · · ·

	doption:	, it other than the
date this document was signed.		
Effective date if applicable:	(no more than 90 days after amendment file date	
	(no more than 90 days after amendment file date)
Note: If the date inserted in this l document's effective date on the D	block does not meet the applicable statutory filing requirement epartment of State's records. I	its, this date will not be listed as the
Adoption of Amendment(s)	(<u>CHECK ONE</u>)	
The amendment(s) was/were ad action was not required.	opted by the incorporators, or board of directors without shareh	older action and shareholder
☐ The amendment(s) was/were ad by the shareholders was/were s	opted by the shareholders. The number of votes cast for the an afficient for approval.	nendment(s)
	proved by the shareholders through voting groups. The following each voting group entitled to vote separately on the amendme	
"The number of votes cas	for the amendment(s) was/were sufficient for approval	
by		
	(voting group)	
(By a c	director, president or other officer – if directors or officers have d, by an incorporator – if in the hands of a receiver, trustee, or	
appoir	ted fiduciary by that fiduciary)	
	AMAL K NEMER IRCHED	
	(Typed or printed name of person signing)	
	SV	
	(Title of person signing)	