P19000076122

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TO: Amendment Section Division of Corporations	COVER LETTER
NAME OF CORPORATION: 305 PHONE FIX INC	
DOCUMENT NUMBER: P19000076122	
The enclosed <i>Articles of Amendment</i> and fee are subm	itted for filing.
Please return all correspondence concerning this matter !' I	r to the following:
ROSA ALVAREZ S C	OTOLONGO
305 PHONE FL	Name of Contact Person X INC
4399 W 16 AVE	Firm/ Company
HIALEAH,FL,33012	Address
LPA1203@GMAIL.COM	City/State and Zip Code for future annual report notification)
For further information concerning this matter, please (
ROSA ALVAREZ SOTOLONGO	at (305) 512-7070
Name of Contact Person	Area Code & Daytime Telephone Number
Enclosed is a check for the following amount made pay	vable to the Florida Department of State:
S35 Filing Fee S43.75 Filing Fee & Certificate of Status	S43.75 Filing Fee & S52.50 Filing Fee Certified Copy Certificate of Status (Additional copy is enclosed) (Additional Copy is enclosed)
Mailing Address Amendment Section Division of Corporations P.O. Box 6327 Tallahassee, F1, 32314	Street Address Amendment Section Division of Corporations The Centre of Tallahassee 2415 N. Monroe Street, Suite 810 Tallahassee, FL 32303

•	Artic	cles of Amendment
	Articl	es of Incorporation
		of
305 PHONE FIX INC		, ,
(Name of Corpor	ration as	currently filed with the Florida Dept. of State)
P19000076122		
(Do	cument N	umber of Corporation (if known)
Pursuant to the provisions of section 607.1006, Flo its Articles of Incorporation:	orida Statu	tes, this Florida Profit Corporation adopts the following amendment(s) to
A. If amending name, enter the new name of the	e corpora	ation:
	1	The new
name must be distinguishable and contain the word "Inc.," or Co.," or the designation "Corp," "I "chartered," "professional association," or the ab	"corpora nc.; or pbr ev iatio	tion," "company," or "incorporated" or the abbreviation "Corp.," [Co". A professional corporation name must contain the word "P.A."
B. Enter new principal office address, if applica		4399 W 16 AVE, HIALEAH, FL,33012
(Principal office address MUST BE A STREET A		<u> </u>
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE)	BOX)	4399 W 16 AVE, HIALEAH, FL.33012
D. If amending the registered agent and/or regi		
new registered agent and/or the new register	rea office	address:
Name of New Registered Agent	<u> </u>	
	(F	T <mark>o</mark> rida street address)
New Registered Office Address:		. Florida
		(City) (Zip Code)
New Registered Agent's Signature, if changing I	Registere	d Agent:
I hereby accept the appointment as registered agen	it. [am]	amiliar with and accept the obligations of the position,
Si	ignature c	of New Registered Agent, if changing
Check if applicable ☐ The amendment(s) is/are being filed pursuant to	s. 6 07 .01	120 (11) (e), F.S.

•			
			e of each officer/director being removed and title, name, and
address of each Office (Attach additional sheet			
Please note the officer/a	s, y neces lirector ti	tle by the first letter of the office title:	
$P = President; \ \widetilde{V} = Vice$	[,] Presider	it; $T = Treasurer$; $S = Secretary$; $D = -$	Director; TR= Trustee; C = Chairman or Clerk; CEO = Chief or holds more than one title, list the first letter of each office held.
Executive Officer, CFO	= Chief I	inancial Officer. If an officer/directo	or holds more than one title, list the first letter of each office held,
President, Treasurer, D. Changes should be note	irector we id in the f	outa be PTD. offowing manner - Gurrenty John Do	e is listed as the PST and Mike Jones is listed as the V. There is
a change, Mike Jones le	eaves the	corporation, Sally S inith is named the	V and S. These should be noted as John Doe, PT as a Change.
Mike Jones, V as Remov	ee, and Sa	illy Smith, SV as an Add,	
Example: X Change	PT	John Doe	
<u>A</u> change		30111170C	
X Remove	V	Mike Jones	
X Add	<u>sv</u>	Sally Smith	
<u></u>	<u>57</u>	Sany smith	
Type of Action	<u>Title</u>	<u>Name</u>	<u>Addres</u> s
(Check One)			
1) Change	<u>P</u>	LISANDRA PĒREZ	641 E 63 ST ,HIALEAH, FL,33013
X		[,] 1	
Add			
Remove		!! ! 	
2) (7)			
2) Change			
Add			
D		III I	
Remove 3) Change		j l	
- , <u></u>	-		
Add			
Remove			
		li l	
4) Change			
Add			
		W1 1	
Remove			
5) Change			
Add			
Remove		11 8	
6) Change			
Add			

_ Remove

•		
If amending or adding additional Article	s enter change(s) here:	
If amending or adding additional Article (Attach additional sheets, if necessary).	Be specific)	
(1 than than one in grant of the grant of th		
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	<u> </u>	
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If an amendment provides for an exchai	ge, reclassification, or cancellation of issued shares, ment if not contained in the amendment itself:	
provisions for implementing the amend	ment if not contained in the amendment itself:	
(if not applicable, indicate N/A)		
	 	
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The date of each amendment(s) add attention and the late this document was signed.	option:	, if other than the
Effective date if applicable:		
anecuse date in appricame.	(no more	than 90 days after amendment file date)
Note: If the date inserted in this blo document's effective date on the Dep		applicable statutory filing requirements, this date will not be listed as the ords.
Adoption of Amendment(s)	(CHECK ONE	
■ The amendment(s) was/were adopaction was not required.	oted by the incorporato	ors, or board of directors without shareholder action and shareholder
☐ The amendment(s) was/were adop by the shareholders was/were suf		rs. The number of votes cast for the amendment(s)
☐ The amendment(s) was/were appr must be separately provided for e	oved by the sharehold each voting group entit	ers through voting groups. The following statement tled to vote separately on the amendment(s):
"The number of votes cast for	or the amendment(s) v	vas/were sufficient for approval
by		"·
08-28-2020 Dated	(voting group)	
Signature /	alwayes	
selected.	ector, president of othe , by an incorporator— d fiduciary by that fid	er officer – if directors or officers have not been if in the hands of a receiver, trustee, or other court uciary)
1	ROSA ALVAREZ <mark>IS</mark> O	TOLONGO
-	(Typed of p	rinted name of person signing)
ī	PRESIDENT	
-	(Title of per	rson signing)