P19000082889

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PICK-UP WAIT MAIL	
(Business Entity Name)	
(Document Number)	
Certified Copies Certificates of Status	
Special Instructions to Filing Officer: W. Blanc gave authorization	,
mr. Blanc gave authorization to could application 10/27/20 dec	
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COVER LETTER

Division of Corporations NAME OF CORPORATION: ___CII....CORP DOCUMENT NUMBER: P19000082889 The enclosed Articles of Amendment and fee are submitted for filing. Please return all correspondence concerning this matter to the following: JUNO BLANC Name of Contact Person CIL SERVICES Firm/ Company 915 NE 125 STREET, SUITE 104 Address NORTH MIAMI, FLORIDA 33161 City/ State and Zip Code CHSERVICE@YAHOO.COM E-mail address: (to be used for future annual report notification) For further information concerning this matter, please call: JUNO BLANC Name of Contact Person Enclosed is a check for the following amount made payable to the Florida Department of State: ☐ \$35 Filing Fee □\$43.75 Filing Fee & □\$43.75 Filing Fee & ■\$52.50 Filing Fee Certificate of Status Certified Copy Certificate of Status (Additional copy is Certified Copy enclosed) (Additional Copy is enclosed) Mailing Address Street Address

Amendment Section Division of Corporations P.O. Box 6327 Tallahassee, F1, 32314

TO: Amendment Section

Amendment Section Division of Corporations The Centre of Tallahassee 2415 N. Monroe Street, Suite 810 Tallahassee, FL 32303

Articles of Amendment Articles of Incorporation

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(Name of Corporation as currently filed with the Florida Dept. of State)

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P190000 82889

nt(s) to

	(Document Number	of Corporation (if known)	£	
Pursuant to the provisions of section 607, its Articles of Incorporation:	.1006, Florida Statutes, th	is Florida Profit Corporation v	adopts the following amendmen	
A. If amending name, enter the new n	ame of the corporation:			
CH SERVICES Caro			The new	
name must be distinguishable and contain "Inc.," or Co.," or the designation "Contrartered," "professional association,"	Torp," "Inc," or "Co",	A professional corporation	" or the abbreviation "Corp.,"	
B. Enter new principal office address,	if applicable:	915 NE 125 STREET SU	JITE 104	
(Principal office address <u>MUST BE A S</u>		NORTH MIAMI, FLORIDA 33161		
C. Enter new mailing address, if appl (Mailing address MAY BE A POST		915 NE 125 STREET SI	UITE 104	
<u> </u>		NORTH MIAMI, FLORIDA 33161		
D. If amending the registered agent ar new registered agent and/or the new Name of New Registered Agent			me of the	
<u> </u>	915 NE 125 STREET SU	ЛТЕ 104		
	(Florida	street address)	 	
New Registered Office Address:	NORTH MIAMI,		. Florida 33161	
		(City)	(Zip Code)	
New Registered Agent's Signature, if c I hereby accept the appointment as regist			ns of the position.	
		_		
	Signature of New	Registered Agent, if changing		
Check if applicable The amendment(s) is/me being filed in	oursuppit to 607 0120 (1)	Liver ES		

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 Doc 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 Doc, PT as a Change, Mike Jones, V as Remove, and Sally Smith, SV as an Add.

Example: X Change	<u> 14</u>	<u>John Doe</u>	
\underline{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>	Address
1) X Change	P	JUNO BLANC	915 NE 125 STREET SUITE 100
Add			NORTH MIAMI, FLORIDA 3316
Remove			
2) Change		_	
Add			
Remove		<u> </u>	
Add			
Remove			
4) Change	-		
Add			
Remove			
5) Change			
Add			
Remove			
6) Change			
Add			
Remove			

raden mum	nal sheets, if necessary). (B	Be specific)			
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-					
					<u> </u>
If an amende	ent provides for an exchang	<u>e, reclassification, </u>	or cancellation of	ssued shares,	
provisions f	r implementing the amendn	aent if not containe	<u>d in the amendme</u>	nt itself:	
(if not aj	plicable, indicate N/A)				
					
				·	
					
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The date of each amendment(s) date this document was signed.	adoption:, if other than the
<u>-</u>	/21/2020
Effective date if applicable:	
	(no more than 90 days after amendment file date)
Note: If the date inserted in this document's effective date on the l	block does not meet the applicable statutory filing requirements, this date will not be listed as the Department of State's records.
Adoption of Amendment(s)	(<u>CHECK ONE</u>)
The amendment(s) was/were a action was not required.	dopted by the incorporators, or board of directors without shareholder action and shareholder
The amendment(s) was/were a by the shareholders was/were	dopted by the shareholders. The number of votes cast for the amendment(s) sufficient for approval.
	pproved by the shareholders through voting groups. The following statement or each voting group entitled to vote separately on the amendmentss:
"The number of votes ca	st for the amendment(s) was/were sufficient for approval
by	
	(voting group)
10/21/202	20
Dated	~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~
Signature	
(By a selec	director, president or other officer - if directors or officers have not been tell, by an incorporator - if in the hands of a receiver, trustee, or other court bted fiduciary by that fiduciary)
	JUNO BLANC
	(Typed or printed name of person signing)
	PRESIDENT
	(Title of person signing)