(((H20000055296 3)))



H200000552963ABC\$

Note: DO NOT hit the REFRESH/RELOAD button on your browser from this page. Doing so will generate another cover sheet.

To:

Division of Corporations

Fax Number : (850)617-6380

From:

Account Name : FANJUL ENTERPRISES LLC

Account Number : I20190000080 Phone : (305)603-8791 Fax Number : (877)503-6086

Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please.

Email Address:

COR AMND/RESTATE/CORRECT OR O/D RESIGN GINGER FLORIDA CORP

Certificate of Status	0
Certified Copy	0
Page Count	01
Estimated Charge	\$35.00

Electronic Filing Menu

Corporate Filing Menu

Help

FEB 2 0 7876

To:

Articles of Amendment to Articles of Incorporation of

(Name of Carporation as curre	ntly filed with the Florida Dept. of State)
(Name or Corporation as Curre P19000084439	nter med will the fromou pept, of state)
	er of Corporation (if known)
(Boodileii Ivailio	w outportain (in minut)
Pursuant to the provisions of section 607.1006, Florida Statutes, thits Articles of Incorporation:	nis Florida Profit Corporation adopts the following amendment(s) to
A. If amending name, enter the new name of the corporation:	
	The new
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.	""company," or "incorporated" or the abbreviation "Corp.," 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>)	
•	
	0
C. Fatau navy mailing address (Canaliashia)	
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)	
	<u>ي کې </u>
D. If amending the registered agent and/or registered office a	ddwers in Florida unter the name of the
new registered agent and/or the new registered office addi	
Name of New Registered Agent	
	····
(Florida	a street address)
New Registered Office Address:	, Florida
	(City) (Zip Code)
New Registered Agent's Signature, if changing Registered Ag I hereby accept the appointment as registered agent. I am famili	ent: ar with and accept the obligations of the position.
Thereby accept the appearance as a square and	, , , , , , , , , , , , , , , , , , , ,
Signature of Ne	w Registered Agent, if changing
en a te controllo	
Check if applicable The amendment(s) is/are being filed pursuant to s. 607.0120 (

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 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		Address		
1) Change	VP	_	LAURA S DIEZ MORA		1314 SOUTH 20TH AVE		
X Add					HOLLYWOOD, FL 33020		
Remove							
2) Change		_			<u> </u>	20 	
Add						<u>E</u>	1)
Remove 3) Change					*1.5	9 -	
Add						9 2	O
Remove					· — · · · · · · · · · · · · · · · · · ·	6	
4) Change							
Add							
Remove					· · · · · · · · · · · · · · · · · · ·		
5) Change		_					
Add							
Remove							
6) Change		_					
Add							
Remove							

Page: 4 of 5

02/19/2020 9:21 AM

[amending or adding additional Arti attach additional sheets, if necessary).	(Be specific)	
· · · · · · · · · · · · · · · · · · ·		

· · · · · · · · · · · · · · · · · · ·		
		57
		-83
		<u> </u>
		: : : : : : : : : : : : : : : : : : :
f an amendment provides for an exc	hange, reclassification, or cancellation of issued shares.	· · · · · · · · · · · · · · · · · · ·
provisions for implementing the ame	endment if not contained in the amendment itself:	왕화 스
(if not applicable, indicate N/A)		再記 ト
		∑ ' 0
		

From: Robert Fanjul

Fax: 18775036086

To:

Fax: (850) 617-6380

Page: 5 of 5

02/19/2020 9:21 AM

The date of each amendment(s) adoption:	if other than the
date this document was signed.	-
Effective date if applicable:	
Effective date <u>if applicable</u> : (no more than 90 days after amendment file date)	
Note: If the date inserted in this block does not meet the applicable statutory filing requirements, this date document's effective date on the Department of State's records.	will not be listed as the
Adoption of Amendment(s) (CHECK ONE)	
☐ The amendment(s) was/were adopted by the incorporators, or board of directors without shareholder action action was not required.	and shareholder
■ The amendment(s) was/were adopted by the shareholders. The number of votes cast for the amendment(s) by the shareholders was/were sufficient for approval.	
☐ The amendment(s) was/were approved by the shareholders through voting groups. The following statement must be separately provided for each voting group entitled to vote separately on the amendment(s):	t ==
'The number of votes cast for the amendment(s) was/were sufficient for approval	20 FI 30 CA 311 T
by	
(wing 8) oabi	5 1
02/18/2020	
Dated	
Signature Unda E	26 26
(By a director, president or other officer – if directors or officers have not been selected, by an incorporator – if in the hands of a receiver, trustee, or other court appointed fiduciary by that fiduciary)	- 5- - 0,
MARIA C ESCUDERO ARANGO	
(Typed or printed name of person signing)	
PRESIDENT	
(Title of person signing)	