## P19000088745

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C. GOLDEN FEB 12 2020

## **COVER LETTER**

TO: Amendment Section

P.O. Box 6327

Tallahassee, FL 32314

Division of Corporations SLOVAR ENTERPRISES CORP NAME OF CORPORATION: P19000088745 DOCUMENT NUMBER: The enclosed Articles of Amendment and fee are submitted for filing. Please return all correspondence concerning this matter to the following: JOSE LUIS LOPEZ Name of Contact Person SLOVAR ENTERPRISES CORP Firm/ Company 8913 NW 111 TER Address HIALEAH FLORIDA 33018 City/ State and Zip Code filip413@msn.com E-mail address: (to be used for future annual report notification) For further information concerning this matter, please call: at ( 786 ) 3937443

Area Code & Daytime Telephone Number JOSE L LOPEZ 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 Amendment Section **Division of Corporations** Division of Corporations

The Centre of Tallahassee

Tallahassee, FL 32303

2415 N. Monroe Street, Suite 810

## Articles of Amendment to Articles of Incorporation of



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SLOVAR ENTERPRI	SES CORP 9898 111 PH 5: 10
(Name of Corporation as currently	filed with the Florida Dept. of State)
P19000088745	
(Document Number of	Corporation (if known)
Pursuant to the provisions of section 607.1006, Florida Statutes, this $F$ its Articles of Incorporation:	Ilorida 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," "co "Inc.," or Co.," or the designation "Corp," "Inc," or "Co". A "chartered," "professional association," or the abbreviation "P.A."	
B. Enter new principal office address, if applicable:	321 NE 58 TERRACE
(Principal office address <u>MUST BE A STREET ADDRESS</u> )	MIAMI FLORIDA 33137
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)	321 NE 58 TERRACE
	MIAMI FLORIDA 33137
D. If amending the registered agent and/or registered office addressinew registered agent and/or the new registered office address:	ess in Florida, enter the name of the
Name of New Registered Agent	
(Florida stree	et address)
New Registered Office Address:	, Florida
	City) (Zip Code)
New Registered Agent's Signature, if changing Registered Agent:	
I hereby accept the appointment as registered agent. I am familiar wi	ith and accept the obligations of the position.
Signature of New Pa	oistered Agent if changing

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	V	Mike Jones	
X Add	<u>sv</u>	Sally Smith	
Type of Action (Check One)	<u>Title</u>	<u>Name</u>	<u>Addres</u> s
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Add			
Remove			
2) Change			
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01	/02/2020
The date of each amendment(s) adoption:	, if other than the
date this document was signed.	
	/02/2020
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 document's effective date on the Department of S	t meet the applicable statutory filing requirements, this date will not be listed as the State's records.
Adoption of Amendment(s) (CHE	ECK ONE)
☐ The amendment(s) was/were adopted by the si by the shareholders was/were sufficient for ap	hareholders. The number of votes east for the amendment(s) pproval.
☐ The amendment(s) was/were approved by the must be separately provided for each voting §	shareholders through voting groups. The following statement group entitled to vote separately on the amendment(s):
"The number of votes cast for the amend	dment(s) was/were sufficient for approval
by	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,
(votin	ng group)
☐ The amendment(s) is/are being filed pursuant	to s. 607.0120 (11) (e), F.S.
■ The amendment(s) was/were adopted by the is action was not required.	ncorporators, or board of directors without shareholder action and shareholder
01/02/2020	
Dated	
Signature we	-fofez
	dent or other officer - if directors or officers have not been
	rporator – if in the hands of a receiver, trustee, or other court
appointed fiduciary	by that fiduciary)
	JOSE LUIS LOPEZ
	Typed or printed name of person signing)
	PRESIDENT
(Title of pers	son signing)