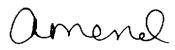
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| (Re                       | questor's Name)   | <del>, </del> |
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| PICK-UP                   | ☐ WAIT            | MAIL          |
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| Certified Copies          | Certificates      | s of Status   |
| Special Instructions to I | Filing Officer:   |               |
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## **COVER LETTER**

TO: Amendment Section

Division of Corporations

**Division of Corporations** 

Tallahassee, FL 32314

P.O. Box 6327

NAME OF CORPORATION: MOTLALES HOUSE RENTAL CO DOCUMENT NUMBER: The enclosed Articles of Amendment and fee are submitted for filing. Please return all correspondence concerning this matter to the following: MOTALES HOUSE RENTAT 6518 WINDING DAK Address For further information concerning this matter, please call: Enclosed is a check for the following amount made payable to the Florida Department of State: S35 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 (Additional Copy enclosed) is enclosed) Mailing Address Street Address Amendment Section Amendment Section

Division of Corporations

Tallahassee, FL 32303

The Centre of Tallahassee

2415 N. Monroe Street, Suite 810

## Articles of Amendment to Articles of Incorporation

FILED

|  | of   |
|--|--|
| MOTALES HOUSE TLE  |  |
| (Name of Corporation as curre  | ntly filed with the Florida Dept. of State) Ph 12 53   |
| P19000093  | +68D   |
| (Document Numbe  | r of Corporation (if known)  |
| Pursuant to the provisions of section 607.1006, Florida Statutes, the ts Articles of Incorporation:  | nis Florida Profit Corporation adopts the following amendment(s)   |
| 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., | A professional corporation name must contain the word  |
| B. Enter new principal office address, if applicable:  | 6518 WINDING OAK DV  |
| (Principal office address <u>MUST BE A STREET ADDRESS</u> )  | TAMEDA FL 33625  |
|  |  |
|  | •  |
| C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)  | 6518 WINDIPS DAY DV  |
|  | TAMPAFL 33625  |
|  | 111-11-11-11-11-11-11-11-11-11-11-11-11  |
|  | <del></del>  |
| <ol> <li>If amending the registered agent and/or registered office and/or the new registered office addr.</li> </ol>   |  |
| Name of New Registered Agent RAPDY   | TORIZES. PRES  |
| 65181  |  |
| (Florida   | street address)  |
| New Registered Office Address: TAW   | PA. Florida FL 33625   |
|  | (City) (Zip Code)  |
|  |  |
| New Registered Agent's Signature, if changing Registered Age   | ent:   |
| hereby accept the appointment as registered agent. I am familia  |  |
| √ajl,  |  |
|  |  |
| Signature of Vev   | v Registered Agent, if changing  |
| Signature of ten   | The grant of the transfer of t |

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.

| Example:                    | •                        |                    |                                    |
|-----------------------------|--------------------------|--------------------|------------------------------------|
| X Change                    | PT John Do               | 20                 |                                    |
| X Remove                    | V Mike Jo                | ones .             |                                    |
| X Add                       | <u>SV</u> <u>Sally S</u> | <u>nith</u>        |                                    |
| Type of Action (Check One)  | Title                    | Name               | Address                            |
| 1)Change                    | Tro                      | RAUDY TORRES       | TAMPA TO BOOK                      |
| Remove 2) Change Add        | VP_                      | YUMISLEIDY GOUZALE | TAMPA TE 33625                     |
| Remove Change Add           | Pars                     | REIDIETZ MOTIACES  | 7007 CAMERON AVE<br>TAMPA FC 33614 |
| Remove 4) Change Add        |                          |                    |                                    |
| Remove 5) Change Add        |                          |                    |                                    |
| Remove 6) Change Add Remove |                          |                    |                                    |
| Kemore                      |                          |                    |                                    |

| If amending or adding additional Ar (Attach additional sheets, if necessary). | (Be specific)       | to nere.             |                     |               |
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| If an amendment provides for an exc<br>provisions for implementing the am     | hange, reclassifica | tion, or cancellatio | n of issued shares, |               |
| (if not applicable, indicate N/A)   | endment it not con  | trained in the amen  | different reserve   |               |
|   |                     |                      |                     | <u> </u>      |
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|   |                     |                      |                     |               |

| Effective date <u>if applicable</u> :  | (no more than 9   | 00 days after amendment file date)  | <del></del>                      |
|--|---|---|----------------------------------|
| Note: If the date inserted in this block document's effective date on the Depart | c does not meet the application of State's records.       | cable statutory filing requirements, thi  | s date will not be listed as the |
| Adoption of Amendment(s)   | ( <u>CHECK ONE</u> )                                      |   |                                  |
| The amendment(s) was/were adopte action was not required.                        | d by the incorporators, or                                | board of directors without shareholder  | action and shareholder           |
| ☐ The amendment(s) was/were adopte<br>by the shareholders was/were suffice       |   | ne number of votes cast for the amendn  | nent(s)                          |
| ☐ The amendment(s) was/were approving the separately provided for each           | ed by the shareholders the<br>ch voting group entitled to | rough voting groups. The following stop vote separately on the amendment(s):          | itement                          |
| "The number of votes cast for  | the amendment(s) was/we                                   | ere sufficient for approval   |                                  |
| by   |   | ···   |                                  |
| <b>,</b>   | (voting group)  |   |                                  |
| selected, b  |   | icer – if directors or officers have not be hands of a receiver, trustee, or other y) |                                  |
|  | RANDY   | TORRES  |                                  |
| _  | (Typed or printed   | TORRES I name of person signing)  |                                  |
|  | PILE  | SIDENT  |                                  |
| _  | (Title of person s  |   |                                  |