(Requestor's Name)
(Address)
(Address)
(O')- (O)
(City/State/Zip/Phone #)
PICK-UP WAIT MAIL
(Business Entity Name)
(dusiness Littly Name)
(Document Number)
Certified Copies Certificates of Status
Special Instructions to Filing Officer:

Office Use Only



200342101852

03/25/20--01005--013 **35.00

APR 07 2020 M. SOLOMON

COVER LETTER

TO: Amendment Section Division of Corporations

NAME OF CORPOR	ATION: JC HERRERA'S F	PROFESSIOANL SERVICE	E INC
DOCUMENT NUME			
The enclosed Articles	of Amendment and fee are su	bmitted for filing.	
Please return all corres	pondence concerning this ma	tter to the following:	
	HERRERA ARTETA, LISA	NDRO	
		Name of Contact Persor	1
		Firm/ Company	
	6409 BLOSSOM AVE		
		Address	
	TAMPA, FL 33614		
		City/ State and Zip Code	
For further information	n concerning this matter, plea	sed for future annual report se call: at (8132152939	
Name of Contact Person		at (Area Co	de & Daytime Telephone Number
Enclosed is a check fo	r the following amount made		
S35 Filing Fee	☐\$43.75 Filing Fee & Certificate of Status	S43.75 Filing Fee & Certified Copy (Additional copy is enclosed)	S52.50 Filing Fee Certificate of Status Certified Copy (Additional Copy is enclosed)
Ame Divi P.O.	ling Address endment Section sion of Corporations Box 6327 ahassee, FL 32314	Amenc Divisio The C	Address Iment Section on of Corporations entre of Tallahassec N. Monroe Street, Suite 810

Tallahassee, FL 32303

Articles of Amendment to Articles of Incorporation of

IC HERRERA'S PROFESSIOANL SERVICE I	CEING
-------------------------------------	-------

(Name of Corporation as current	ly filed with the Florida Dept. of State)	-		
P20000005475				
(Document Number of	of Corporation (if known)			
Pursuant to the provisions of section 607.1006, Florida Statutes, this its Articles of Incorporation:	Florida Profit Corporation adopts the fol	lowing amen	dment(s	i) to
A. If amending name, enter the new name of the corporation:				
JC HERRERA' S PROFESSIOANAL SERVICE INC		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.	A professional corporation name must c	eviation "Cor contain the w	p" vord	
B. Enter new principal office address, if applicable: (Principal office address MUST BE A STREET ADDRESS)				
			202	
			HAR	-
C. Enter new mailing address, if applicable:		7. J	ม 25	
(Mailing address MAY BE A POST OFFICE BOX)		.19		ī
			:ZI W	Ţ
		<u> </u>	-05	
D. If amending the registered agent and/or registered office add		**		
new registered agent and/or the new registered office addres	<u>s:</u>			
Name of New Registered Agent				
, Cl. : A.	treet address)			
(Pioriau si				
New Registered Office Address:	, Florida,	(Zip Code)		
New Registered Agent's Signature, if changing Registered Agen I hereby accept the appointment as registered agent. I am familiar	it: with and accept the obligations of the pos	ition.		
Signature of New I	Registered Agent, if changing			
Check if applicable				
Circle is applicable				

☐ The amendment(s) is/are being filed pursuant to s. 607.0120 (11) (c), 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)

Example:

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	<u>V</u>	Mike Jones	
X Add	<u>sv</u>	Sally Smith	
Type of Action (Check One)	Title	<u>Name</u>	<u>Addres</u> s
1) Change			
Add			
Remove			
2) Change			
Add			<u></u>
Remove Change		-	- <u>ma</u> 70
Add			3 1918 3 1918 50 02
Remove			
4) Change			
Add			
Remove			
5) Change			
Add			
Remove			
6) Change	<u></u>		
Add			
Remove			

The date of each amendment(s) ad	loption:	, if	other th	an the
date this document was signed.				
Effective date if applicable:				
	(no more than 90 days after amendment file date)			
Note: If the date inserted in this bl document's effective date on the De	lock does not meet the applicable statutory filing requirements, this date partment of State's records.	will not	be listed	as th
Adoption of Amendment(s)	(CHECK ONE)			
The amendment(s) was/were ado action was not required.	pted by the incorporators, or board of directors without shareholder action	and share	eholder	
☐ The amendment(s) was/were ado by the shareholders was/were su	pted by the shareholders. The number of votes cast for the amendment(s) flicient for approval.			
☐ The amendment(s) was/were app must be separately provided for	roved by the shareholders through voting groups. The following statement each voting group entitled to vote separately on the amendment(s):			
"The number of votes cast	for the amendment(s) was/were sufficient for approval			
by	(voting group)	E-17.7	2020	
, <u> </u>	(voting group)	2 (r)	MAR	4.
Dated	13/20/20	14.07 OF 517	₹25 PHI2÷	
selected	irector, president or other officer – if directors or officers have not been d, by an incorporator – if in the hands of a receiver, trustee, or other court red fiduciary by that fiduciary)	- BA	05	,
	HERRERA ARTETA, LISANDRO			
	(Typed or printed name of person signing)	•		
	PRESIDENT			
	(Title of person signing)	·····		