P2000000 11585

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

Office Use Only



400348784924

07/23/20--01034--007 **43.75

RECEIVED
JUL 1 6 2020

On the Congression 18

Sumo

AUG 3 0 2020 D CUSHING

COVER LETTER

Division of Corporations Sobasarian Inc NAME OF CORPORATION: 20000011585 DOCUMENT NUMBER: The enclosed Articles of Amendment and fee are submitted for filing. Please return all correspondence concerning this matter to the following: Pedro Cuux Name of Contact Person 9280 Fontainebleau Blvd #401 Fム 33/92 City/ State and Zip Code Pedricuba(e) hotmail.com E-mail address: (to be used for future annual report notification) 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 enclosed) (Additional Copy is enclosed)

Mailing Address

TO: Amendment Section

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

Street Address

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

Articles of Amendment

to
Articles of Incorporation

of

Sebasarian	Inc	
(Name of Corporation as current	ly filed with the Florida Dept. of State)	
P200000 11	585	
(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 follo	wing amendment(s) to
A. If amending name, enter the new name of the corporation:		49
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 con	The new iation "Corp.," ntain the word
B. Enter new principal office address, if applicable: (Principal office address <u>MUST BE A STREET ADDRESS</u>)	9210 Fontaineblea apt 208	N Blud
	Miami FL 3317	7
C. Enter new mailing address, if applicable: (Mailing address <u>MAY BE A POST OFFICE BOX</u>)	9210 Fortainableau apt 208	Blud
	Miami FL 33	172
D. If amending the registered agent and/or registered office add	ress in Florida, enter the name of the	130
Name of New Registered Agent	<u>s:</u> //	
		か (Ag
(Florida st	reet address)	
New Registered Office Address:	m : 1	
New Registered Office Address.	(City) Florida (2	Tip Code)
New Registered Agent's Signature, if changing Registered Agent	<u>:</u>	
I hereby accept the appointment as registered agent. I am familiar	with and accept the obligations of the position	m.
Signature of New R	Registered Agent, if changing	
Check if anniicable		

Check if applicable

The amendment(s) is/are being filed pursuant to s. 607.0120 (11) (e), F.S.

address of each Officer (Attach additional sheets Please note the officer/d P = President; V = Vice Executive Officer; CFO: President, Treasurer, Di Changes should be noted a change, Mike Jones led Mike Jones, V as Remove	and/or I s, if neces, irector tit Presiden = Chief F rector wo I in the fo	Director being added: sary) le by the first letter of th t; T= Treasurer; S= Section inancial Officer. If an opuld be PTD. ellowing manner. Curre corporation, Sally Smith	e office title: cretary; D= Director; TR= fficer/director holds more to ontly John Doe is listed as th	er/director being removed and title, name, and Trustee; C = Chairman or Clerk; CEO = Chief han one title, list the first letter of each office held. he PST and Mike Jones is listed as the V. There is se should be noted as John Doe, PT as a Change,
Example: X Change	<u>PT</u>	John Doe	N/H	
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) Change	 ::			
Add				
Remove				
2) Change				
Add				
Remove Change				
Add				
Remove				
4) Change				
Add				
Remove				
5) Change				
Add				
Remove				-
6) Change				
Add				
Remove				

(Attach additional sheets, if necessary).	cles, enter change(s) here: (Be specific)
77-	
	
_ 	
	
If an amendment provides for an exch:	ange, reclassification, or cancellation of issued shares,
provisions for implementing the amen (if not applicable, indicate N/A)	ndment if not contained in the amendment itself:
11/D	
111 1 7 7	
10//7	
10//7	
10//7	
10//7	

. .

The date of each amendment(s) adoption:	, if other than
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 block does not meet the applicable statutory filing requirement document's effective date on the Department of State's records.	s, this date will not be listed as
Adoption of Amendment(s) (CHECK ONE)	
The amendment(s) was/were adopted by the incorporators, or board of directors without shareholder action was not required.	older action and shareholder
☐ The amendment(s) was/were adopted by the shareholders. The number of votes cast for the amendment(s) was/were sufficient for approval.	endment(s)
☐ The amendment(s) was/were approved by the shareholders through voting groups. The following must be separately provided for each voting group entitled to vote separately on the amendment	ig statement u(s):
"The number of votes cast for the amendment(s) was/were sufficient for approval	
by	
by	
Dated 07/07/2020	
Signature	
By a director, president or other officer - if directors or officers have a selected, by an incorporator - if in the hands of a receiver, trustee, or cappointed fiduciary by that fiduciary)	not been other court
(Typed or printed name of person signing)	
(Typed or printed name of person signing)	
(Title of person signing)	

the

the