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COVER LETTER

TO: Amendment Section Division of Corporations

NAME OF CORPOR	ATION: MARTINEZ & G.	ASTELL SERVICES , INC	· ·
DOCUMENT NUMB			
The enclosed Articles of	of Amendment and fee are st	ibmitted for filing.	
Please return all corresp	oondence concerning this ma	atter to the following:	
	LIBERTINO MARTINEZ (SASTELL	
-		Name of Contact Person	n .
	1028 NE 8th PL	Firm/Company	
-	CAPE CORAL, FL 33909	Address	
_		City/ State and Zip Cod	e
1	LIBERTINO1951@HOTM/	AIL.COM	
-	E-mail address: (to be us	sed for future annual report	notification)
For further information	concerning this matter, plea	se call;	
LIBERTINO MARTIN	REZ GASTELL	at (385-9075
Name of Contact Person			de & Daytime Telephone Number
Enclosed is a check for	the following amount made	payable to the Florida Depa	artment of State:
S35 Filing Fee	□\$43.75 Filing Fee & Certificate of Status	S43.75 Filing Fee & Certified Copy (Additional copy is enclosed)	□\$52.50 Filing Fee Certificate of Status Certified Copy (Additional Copy is enclosed)
Mailing Address 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

	of		Eli
MARTINEZ & GASTELL SERVICES	. INC		IL.ED
(<u>Name</u>	, INC of Corporation as currently file	d with the Florida Depr	Jos State)
P20000016789		,	A 10
	(Document Number of Cor	poration (if known) 💯 宁	· ** 53
Pursuant to the provisions of section 607 its Articles of Incorporation:	.1006, Florida Statutes, this <i>Flori</i>	da Profit Corporation ad	opts the following amendment(s) t
A. If amending name, enter the new n	ame of the corporation:		
			The new
name must be distinguishable and contain "Inc.," or Co.," or the designation "C "chartered," "professional association,"	Corp," "Inc," or "Co". A pro or the abbreviation "P,A,"	uny," or "incorporated" of fessional corporation no	or the abbreviation "Corp.," ame must contain the word
B. Enter new principal office address, (Principal office address <u>MUST BE A S</u>			
	_		
C. Enter new mailing address, if appl			
(Mailing address <u>MAY BE A POST</u>	<u>OPFICE BOX</u>)		
		_	
	_		
) If amonding the accidence			
 If amending the registered agent are new registered agent and/or the new 	<u>w registered office address ii</u>	n Florida, enter the nam	<u>e of the</u>
Name of New Registered Agent	LIBERTINO MARTINEZ GAS	TELL	
<u>_ max ng max ng max ca ng cm</u>	1028 NE 8th PL		
	(Florida street ad	dressi	
<u>New Registered Office Address:</u>	CAPE CORAL		Florida 33909
new negative cu vyjecy jaar eas.	(City)		(Zip Code)
New Registered Agent's Signature, if e hereby accept the appointment as regist		nd accent the obligations	of the position
77	<u> </u>	and the experimental facilities and the control of	oj ne position.
	Pirot	00	
	hul 310	ec	
	Signature of New Registe	red Agent, if changing	
Check if applicable			
\square The amendment(s) is/are being filed p	ursuant 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.

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>	Address
1) Change			
Add			
Remove			
2) Change			
Add			
Remove 3) Change			
Add			
Remove			
4) Change			
Add			
Remove			
5) Change	-		
Add			
Remove			
б) Change		-	
Add			
Remove			

attach <i>additional sheets,</i>	if necessary). (B	i <mark>, enter change(</mark> Be specific)				
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an amendment provid	les for an exchang	e, reclassificati	on, or cancellat	ion of issued sh:	ares.	
<u>rovisions for impleme</u>	nting the amendm	ent if not cont	ained in the am	endment itself:		
(if not applicable, in	dicate N/A)					
					-	
						
		 •			*	
·				 .		-

The date of each amendment(s) adop date this document was signed.	tion:	, if other than the
Ç		
Effective date if applicable:	tno more than 90 days after amendment fil	e date)
Note: If the date inserted in this block document's effective date on the Depar	does not meet the applicable statutory filing requiement of State's records.	rements, this 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 by the shareholders was/were suffic	d by the shareholders. The number of votes cast for ient for approval.	the amendment(s)
• •	ed by the shareholders through voting groups. The fa th voting group entitled to vote separately on the amo	· ·
"The number of votes cast for	the amendment(s) was/were sufficient for approval	
by	··	
	(voting group)	
()3/()6/2()2() Dated	au All	
selected, by	or, president or other officer – if directors or officers an incorporator – if in the hands of a receiver, trust iduciary by that fiduciary)	
11.1	BERTINO MARTINEZ GASTELL	
	(Typed or printed name of person signing)	
OV	/NER / PRESIDENT	
	(Title of person signing)	