## P20 0000 Z4525

(Requestor's Name)
(Address)
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(City/State/Zip/Phone #)
PICK-UP WAIT MAIL
(Business Entity Name)
(Document Number)
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tructions to Filing Officer:
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## **COVER LETTER**

**TO:** Amendment Section Division of Corporations

DOCUMENT N	RPORATION: Mr. Juan Garay F UMBER: P20000024525		
	icles of Amendment and fee are su	ibmitted for filing.	
Please return all	correspondence concerning this ma	atter to the following:	
	Juan J Garay		
	Mr. Juan Garay RE P.A.	Name of Contact Person	1)
	<del></del>	Firm/ Company	
	506 NW 8 ST		
		Address	
	Homestead, FL 33030		
		City/ State and Zip Cod	c
	sas-Ilc@outlook.com		
	E-mail address; (to be u	earl for future ennual respect	nui filmi
		sea for future annual report	nothication)
	nation concerning this matter, plea	se call:	
	nation concerning this matter, plea	se call:	
Juan J Garay	nation concerning this matter, plea	se call:at (at Co	923-8880 de & Daytime Telephone Number
Juan J Garay	nation concerning this matter, plea ame of Contact Person ck for the following amount made	se call:at (at Co	923-8880 de & Daytime Telephone Number

## Articles of Amendment to Articles of Incorporation of

Mr. Juan Garay RE P A.	
(Name of Corporation as curre	ntly filed with the Florida Dept. of State)
P20000024525	
(Document Number	r of Corporation (if known)
Pursuant to the provisions of section 607,1006, Florida Statutes, thits Articles of Incorporation:	is Florida Profit Corporation adopts the following amendment(s) to
A. If amending name, enter the new name of the corporation:	
Juan J Garay P.A.	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.	"company," or "incorporated" or the abbreviation "Corp.,"  A professional corporation name must contain the word
B. Enter new principal office address, if applicable: (Principal office address MUST BE A STREET ADDRESS)	N/A
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BON)	N/A P
imating address SIAT BE A POST OFFICE BOA	N/A PH C
D. If amending the registered agent and/or registered office adnew registered agent and/or the new registered office addresses.	
Name of New Registered Agent N/A	
(Florida	street address)
New Registered Office Address:	(City) , Florida (Zip Code)
New Registered Agent's Signature, if changing Registered Age I hereby accept the appointment as registered agent—I am familia	ent:  or with and accept the obligations of the position
,,	and the second control of the provinces.
Signature of New	Registered Agent, if changing

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 = ChiefExecutive 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 Doc 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 8. 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	рт	John Do	<u>oc</u>	
X Remove	<u>V</u>	Mike Jo		
X Add	<u>SV</u>	Sally Sn	<u>nith</u>	
Type of Action (Check One)	<u>Title</u>		<u>Name</u>	Address
1) Change		_		
Add				
Remove				
2) Change		_		
Add				
Remove 3.) Change	<del></del>	_		
Add				
Remove				
4) Change		_		
Add				
Remove				
51 Change		_		
Add				
Remove				
6) Change		<del></del>		
Add				
Remove				

F. Hamending or adding additional Articles, enter change(s) here: (Attach additional sheets, if necessary), (Be specific)
N/A
······
F. If an amendment provides for an exchange, reclassification, or cancellation of issued shares, provisions for implementing the amendment if not contained in the amendment itself:
(if not applicable, indicate $NA$ )
N/A

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	03/28/2020
The date of each amendment(s	) adoption:, if other than th
date this document was signed.	
	3/28/2020
Effective date <u>if applicable</u> :	
	(no more than 90 days after amendment file date)
Note: If the date inserted in thi document's effective date on the	s block does not meet the applicable statutory filing requirements, this date will not be listed as the Department of State's records.
Adoption of Amendment(s)	(CHECK ONE)
■ The amendment(s) was/were action was not required.	adopted by the incorporators, or board of directors without shareholder action and shareholder
The amendment(s) was/were by the shareholders was/were	adopted by the shareholders. The number of votes east for the amendment(s) sufficient for approval.
	approved by the shareholders through voting groups. The following statement for each voting group entitled to vote separately on the amendment(s):
"The number of votes c	ast for the amendment(s) was/were sufficient for approval
hy	, <del>"</del>
	(voting group)
03/28/2	020
Dated	
sþ\o	a director, president or other officer – if directors or officers have not been cted, by an incorporator – if in the hands of a receiver, trustee, or other court sainted fiduciary by that fiduciary)
	Juan J Garay
	(Typed or printed name of person signing)
	President
	(Title of person signing)