P20000027152

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COVER LETTER

TO: Amendment Section Division of Corporations NAME OF CORPORATION: AGILSON MENDONCA & PHH MGT SVC INC DOCUMENT NUMBER: P20000027152 The enclosed Articles of Amendment and fee are submitted for filing. Please return all correspondence concerning this matter to the following: Name of Contact Person Seekh Firm/ Company 4984 W Atlantic Blvd Address Margate Florida 33063 City/ State and Zip Code seekh.tax@gmail.com E-mail address: (to be used for future annual report notification) For further information concerning this matter, please call: at (754) 307-9031 Area Code & Daytime Telephone Number Jennifer Wright Name of Contact Person Enclosed is a check for the following amount made payable to the Florida Department of State: ☐\$43.75 Filing Fee & □\$52.50 Filing Fee S35 Filing Fee □\$43.75 Filing Fee & Certificate of Status Certified Copy Certificate of Status Certified Copy (Additional copy is (Additional Copy enclosed) is enclosed) Street Address **Mailing Address** Amendment Section Amendment Section Division of Corporations Division of Corporations P.O. Box 6327 The Centre of Tallahassee 2415 N. Monroe Street, Suite 810 Tallahassee, FL 32314

Tallahassee, FL 32303

Articles of Amendment to Articles of Incorporation of

AGILSON MENDONCA & PHH MGT SVC INC

	of Corporation as currentl	y filed with the Florida Dept. of State)	
P20000027152			
	(Document Number of	f Corporation (if known)	
Pursuant to the provisions of section 607 its Articles of Incorporation:	.1006, Florida Statutes, this	Florida Profit Corporation adopts the follo	owing amendment(s) to
A. If amending name, enter the new n	name of the corporation:		
name must he distinguishable and contain "Inc.," or Co.," or the designation "i "chartered," "professional association.	Corp," "Inc," or "Co". A	company," or "incorporated" or the abbrev I professional corporation name must co	The new viation "Corp.," ntain the word
B. <u>Enter new principal office address,</u> (Principal office address <u>MUST BE A S</u>			· · · · · · · · · · · · · · · · · · ·
			1029.
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)		,	
			5: 1
D. If amending the registered agent as new registered agent and/or the ne			
Name of New Registered Agent	Manuel Martinez, Victor		
	5415 NW 15t Street		
	(Florida stre	et address)	
New Registered Office Address:	Margate	Florida 3306	-
	((City)	Zip Code)
New Registered Agent's Signature, if can be desired the appointment as registed the appointment as registed.	hanging Registered Agent: tered agent. I am familiar w	ith and accept the obligations of the position	on.
_	Signature of New Re	gistered Agent, if changing	
		יש יש יש ייש ייש	

Check if 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)

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	PT	John Doc	
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>	<u>Addres</u> s
1) Change	P	Soares, Deucinea	2005 JEFFERSON STREET
Add			APT 302
X Remove			HOLLYWOOD, FL 33020
2) Change	<u>P</u>	Manuel Martinez, Victor	5415 NW 15t Street
X Add			
Remove 3) Change			Margate Florida 33020
Add			
Remove			<u></u>
4) Change			
Add			 -
Remove			
5) Change			
Add			
Remove			
6) Change			
Add			
Remove			

	ach additional sheets, if necessary). (Be specific)	
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an	amendment provides for an exchange, reclassi	fication, or cancellation of issued shares,
	visions for implementing the amendment if not	contained in the amendment itself:
F0 ¥	(if not applicable, indicate N/A)	
rov		
<u> </u>		
rov		
rov		
rov		

date this document was signed.	s) adoption:	_, if other than the
Effective date <u>if applicable</u> :		
	(no more than 90 days after amendment file date)	, <u>=::-</u>
Note: If the date inserted in the document's effective date on the	is block does not meet the applicable statutory filing requirements, this date will not Department of State's records.	ot be listed as the
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 sh	narcholder
☐ The amendment(s) was/were by the shareholders was/were	adopted by the shareholders. The number of votes cast for the amendment(s) e sufficient for approval.	
☐ The amendment(s) was/were must be separately provided	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	
by		
	(voting group)	
Dated	9-30-20	
Signature	/////m	-
sele	a director, president or other officer – if dreeters or officers have not been cted, by an incorporator – if in the hands of a receiver, trustee, or other court ointed fiduciary by that fiduciary)	
	Victor Manuel Martinez	
	(Typed or printed name of person signing)	
	President	
	(Title of person signing)	