P20 000036023

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R. WHATE.
JUN 1 7 2020

COVER LETTER

TO: Amendment Section Division of Corporations

NAME OF CORPO	RATION: ALFISH BOATS I	REPAIRS CORP			
DOCUMENT NUM	BER: P20000036023				
	of Amendment and fee are su	bmitted for filling.			
Please return all corre	spondence concerning this ma	itter to the following:			
	ALFREDO PEREZ CORDE	RO			
	Name of Contact Person				
	Firm/ Company				
	P.O. BOX 343075				
	Address				
	HOMESTEAD, FL 33034				
		City/ State and Zip Code	•		
	alfishcorp@gmail.com				
	E-mail address: (to be us	sed for future annual report	notification)		
For further informatic	on concerning this matter, plea	se call:			
Nieves Delgado		305	7552314		
Name	of Contact Person	at (305) 7552314 Area Code & Daytime Telephone Number			
Enclosed is a check for	or the following amount made	payable to the Florida Depa	riment of State:		
☐ \$35 Filing Fee	☐S43.75 Filing Fee & Certificate of Status	☐\$43.75 Filing Fee & Certified Copy (Additional copy is enclosed)	S52.50 Filing Fee Certificate of Status Certified Copy (Additional Copy is enclosed)		
Mailing Address Amendment Section Division of Corporations P.O. Box 6327 Tailahassee, 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

ALFISH ROATS REPAIRS CORP.

2020 1-1 21 2:40

(Name of Corp	oration as curren	ntly filed with the Florida Dept. of State)
220000036023		
(E	Document Number	of Corporation (if known)
Pursuant to the provisions of section 607,1006, F ts Articles of Incorporation:	forida Statutes, thi	is Florida Profit Corporation adopts the following amendment(s)
A. If amending name, enter the new name of t	the corporation:	
ALFISH CORP		The new
name must be distinguishable and contain the wor "Inc.," or Co.," or the designation "Corp," ' "chartered," "professional association," or the c	"Inc," or "Co".	"company," or "incorporated" or the abbreviation "Corp.," A professional corporation name must contain the word
3. Enter new principal office address, if appli	eable:	N/A
Principal office address MUST BE A STREET		
Enter new mailing address, if applicable:		N// S
(Mailing address MAY BE A POST OFFIC	<u>E BON</u>)	N/A
		
 If amending the registered agent and/or re new registered agent and/or the new regist 		
	ered ornce addre	35.
Name of New Registered Agent N/A		
Name of New Registered Agent N/A		
Name of New Registered Agent	(Florida :	street address)
Name of New Registered Agent	(Florida :	street address), Florida

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)

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 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 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	TT	John Doe	
X Remove	\underline{V}	Mike Jones	
X Add	<u>SV</u>	Sally Smith	
Type of Action (Check One)	Title	<u>Name</u>	Address
1) Change		N/A	
Add			
Remove			
2) Change		N/A	
Add			
Remove 3) Change		N/A	
Add			
Remove			
4) Change		N/A	
Add			
Remove			
5) Change		N/A	
Add			
Remove			<u> </u>
6) Change		N/A	
Add			
Remove			

E. If amending 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 N/A)	
N/A	
	
	
	

A Company of the Comp

	05/26/2020		
The date of each amendment(s) addate this document was signed.	option:		if other than the
05/20	5/2020		
Effective date <u>if applicable</u> :			
	(no more than 90 d	lays after amendment file date)	
Note: If the date inserted in this bl document's effective date on the De		ole statutory filing requirements, this date wil	ll not be listed as the
Adoption of Amendment(s)	(<u>CHECK ONE</u>)		
■ The amendment(s) was/were ado action was not required.	pted by the incorporators, or boa	ard of directors without shareholder action and	d shareholder
☐ The amendment(s) was/were ado by the shareholders was/were su		number of votes cast for the amendment(s)	
		gh voting groups. The following statement stee separately on the amendment(s):	
"The number of votes cast	for the amendment(s) was/were	sufficient for approval	
by			
	(voting group)		
05/26/2020 Dated	(2) m/		
Signature	124	_	
		r – if directors or officers have not been	
	i, by an meor porator – it in the n ed fiduciary by that fiduciary)	nands of a receiver, trustee, or other court	
••	ALFREDO PEREZ CORDERO)	
	(Typed or printed nat	me of person signing)	
	., ,	,	
	PRESIDENT		

(Title of person signing)