Jun 16 20, 04:18p	Three k	3058875844	p.1
6/16/2020	Div	ision of Corporations	
200		ment of State Corparations g Cover Sheet	5
N	ote: Please print this page and use it as (shown below) on the top and bot	a cover sheet. Type the fax au tom of all pages of the documer	dit number at.
	(((H200001	83226 3)))	
	H200001 332	263AECY	
N	ote: DO NOT hit the REFRESH/RELOA Doing so will generate	D button on your browser from another cover sheet.	this page.
	To: Division of Corporations Fax Number : (850)617-6	380	JUN 16 DRETARY AHASSE
	From: Account Name : THREE K FA Account Number : I201800000 Phone : (305)805-3 Fax Number : (305)887-5	516	AM 8: 36 OF STATE E.FLORIDA
	**Enter the email address for this bu annual report mailings, Enter or Email Address:	siness entity to be used for ally one email address please.	future Mall.Cor
	COR AMND/RESTATE/CO		<b>.</b> .
	CHANTRE MO	REIRA CORP	
	CHANTRE MO	REIRA CORP	<b>.</b> .
	CHANTRE MO	REIRA CORP	2020 JU!! 16
	CHANTRE MO	REIRA CORP	2020 JUII 16 PM
	CHANTRE MO Certificate of Status Certified Copy Page Count	0           0           0           0           06	2020 JU!: 16

JUN 1 7 2020

Jun 16 20, 04:18p Three k

3058875844

4+200001832265

### COVER LETTER

TO: Amendment Section Division of Corporations

# NAME OF CORPORATION: \_\_\_\_\_\_\_

DOCUMENT NUMBER: \_\_\_\_\_

The enclosed Articles of Amendment and fee are submitted for filing.

Please return all correspondence concerning this matter to the following:

MICHELLE A RODRIGUEZ

Name of Contact Person

CHANTRE MOREIRA CORP

Firm/ Company

1720 S GLADES DR APT 10

Address

NORTH MIAMI BEACH, FL 33162

City/ State and Zip Code

MICHELLE.CHANTRE@GMAIL.COM

E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

MICHELLE A RODRIGUEZ at (954 Area Code & Daytime Telephone Number

Enclosed is a check for the following amount made payable to the Florida Department of State:

🔳 S35 Filing Fee

S43.75 Filing Fee & Certificate of Status ding Fee & Copy al copy is d) S52.50 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 \$10 Tallahassee, FL 32303

# 3058875844 p.3 H200001832263)

Articles of Amendment to Articles of Incorporation

of

## CHANTRE MOREIRA CORP

#### P20000036988

(Document Number of Corporation (if known)

Pursuant to the provisions of section 607.1006, Florida Statutes, this Florida Profit Corporation adopts the following amendment(s) to its Articles of Incorporation:

#### A. If amending name, enter the new name of the corporation:

N/A	The new
	n," "company," or "incorporated" or the abbreviation "Corp.," o". A professional corporation name must contain the word "P.A."
B. Enter new principal office address, if applicable: (Principal office address <u>MUST BE A STREET ADDRESS</u> )	N/A
C. <u>Enter new mailing address, if applicable:</u> (Mailing address <u>MAY BE A POST OFFICE BOX</u> )	N/A
D. If amending the registered agent and/or registered office new registered agent and/or the new registered office ad	
Name of New Registered Agent	
	idu street address)
New Registered Office Address:	(City) (Zip Code)

New Registered Agent's Signature, if changing Registered Agent:

I hereby accept the appointment as registered agent. I am familiar with and accept the obligations of the position.

Signature of New Registered Agent, if changing

Check if applicable

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

Jun 16 20, 04:18p Three k 3058875844

( #20000183226

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 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 Doc, PT as a Change, Mike Jones, V as Remove, and Sally Smith. SV as an Add.

Example:	, G7864 J144	y omin, or as an Aua.	~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~
<u>X</u> Change	<u> 119</u>	John Due	RALLA TA
X Remove	$\underline{v}$	<u>Mike Janes</u>	
<u>X</u> Add	<u>sv</u>	Sally Smith	
<u>Type of Action</u> (Check One)	<u>Title</u>	Name	Address Contraction Address
1) Change	PRES	MICHELLE A. RODRIGUEZ	1720 S GLADES DR
X Add			N. MIAMI BEACH, FL 33162
Remove			
2) Change	VP	GLADYS MOREIRA MORENO	1720 S GLADES DR APT 10
Add			N. MIAMI BEACH, FL 33162
X Remove 3) Change	<u> </u>	<u> </u>	
Add			
Remove			······
4) Change			
Add			
Келоче			<u> </u>
5) Change			
Add			
Remove			
6) Change			
Add			
Remove			

3058875844

р.5

58875844 p.5 A20000183226-3

# 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	SECHLIARY OF SALLAHASSEE FL	
		∦. †

Jun 16 20, 04:18p Thre	e k	3058875844		p.6
The date of each amendm date this document was sig	06-16-2020 eent(s) adoption:	(H20000		(2263)
Effective date <u>if applicabl</u>	06-16-2020 le:	ys after amendment file date)		
Note: If the date inserted document's effective date of	in this block does not meet the applicable on the Department of State's records.	e statutory filing requirements, th	is date will i	not be listed as the
Adoption of Amendment	(s) ( <u>CHECK ONE</u> )			
The amendment(s) was/ action was not required.	were adopted by the incorporators, or boar	d of directors without shareholder	action and s	hareholder
The amendment(s) was/ by the shareholders was	were adopted by the shareholders. The nur s/were sufficient for approval.	mber of votes cast for the amenda	ient(s)	
"The number of v	were approved by the shareholders through vided for each voting group entitled to vote otes cast for the amendment(s) was/were su	separately on the amendment(s):	Rent CRETARY	
by	(voting group)	······································	1 0 1	
06 Dated	-16-2020	_	ORIO,	
Signature	By a director, president or other officer - selected, by an incorporator - if in the har	if directors or officers have not b nds of a receiver, trustee, or other	een Couri	-
	appointed fiduciary by that fiduciary) MICHELLE A. RODRIGUEZ			
	(Typed or printed name	e of person signing)		
	PRESIDENT			
	(Title of person signing	g)		<u></u>