P20000043228

(Re	equestor's Name)	
(Ac	ldress)	
(Ac	idress)	
(Ci	ty/State/Zip/Phon	e #)
PICK-UP	☐ WAIT	MAIL
(Bu	usiness Entity Nar	me)
(Do	ocument Number)	
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11/13/20--01015--015 **35.00

2020 NOV 13 PM 6: 47
SECKETARY OF STATE

12/17/20



COVER LETTER

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TO: Amendment Section Division of Corporations

NAME OF CORPO	RATION: 2 H C CORP		
	BER: P20000043228		-
	of Amendment and fee are su	bmitted for filing.	
Please return all corre	spondence concerning this ma	tter to the following:	
	ALAN MARTINEZ		
		Name of Contact Persor	1
	SIMPLEX GROUP		
		Firm/ Company	
	7500 NW 52ND ST STE 100	•	
		Address	
	MIAMI, FL 33166		
		City/ State and Zip Code	2
	processingpermits@simplexg	group,net	
	E-mail address: (to be us	sed for future annual report	notification)
	on concerning this matter, please / SIMPLEX GROUP	se call: at (³⁰⁵	599-8287
Name	of Contact Person	at (Area Coo)de & Daytime Telephone Number
Enclosed is a check for	or the following amount made		
S35 Filing Fee	☐S43.75 Filing Fee & Certificate of Status	S43.75 Filing Fee & Certified Copy (Additional copy is enclosed)	S52.50 Filing Fee Certificate of Status Certified Copy (Additional Copy is enclosed)
Am Div P.C	iling Address endment Section ision of Corporations b. Box 6327 lahassee, FL 32314	Amend Divisio The Co 2415 N	Address ment Section n of Corporations entre of Tallahassee N. Monroe Street, Suite 810 assee, FL 32303

Articles of Amendment to Articles of Incorporation of

FILED

2 H C CORP		2020 NOV 13 PM 6: 47		
(Name	of Corporation as current	ly filed with the Florida-Dept. of State)		
P20000043228 TALL A SOFT FATE				
	(Document Number o	f Corporation (if known)		
Pursuant to the provisions of section 607, its Articles of Incorporation:	1006, Florida Statutes, this	Florida Profit Corporation adopts the following amendment(s) to		
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 "Contrartered," "professional association,"	Corp," "Inc," or "Co"	company," or "incorporated" or the abbreviation "Corp.," A professional corporation name must contain the word		
B. Enter new principal office address,		4711 W Waters Ave #707		
(Principal office address MUST BE A S		TAMPA, FL 33614		
		-		
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)		4711 W Waters Ave #707		
		TAMPA, FL 33614		
D. If amending the registered agent ar new registered agent and/or the ne				
Name of New Registered Agent				
	4711 W Waters Ave #707			
		reet address)		
New Registered Office Address:	TAMPA	Florida		
		(City) (Zip Code)		
New Registered Agent's Signature, if c I hereby accept the appointment as regist	hanging Registered Agent tered agent. I am familiar	u with and accept the obligations of the position.		
	St P. U. J.			
	Signature of New h	Registered Agent, if changing		
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)

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 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>1''1</u>	John Doe				
X Remove	<u>V</u> <u>Y</u>	Mike Jones				
X Add	<u>SV</u> <u>S</u>	Sally Smith				
Type of Action (Check One)	<u>Title</u>	<u>Name</u>	<u>Addres</u> s			
1) X Change	Р	CASTELLANO LOPEZ, HECTOR	4711 W Waters Ave #707			
Add			TAMPA, FL 33614			
Remove						
2) X Change	<u>VP</u>	CASTELLANO, HECTOR D	4711 W Waters Ave #707			
Add			TAMPA, FL 33614			
Remove 3) Change						
Add						
Remove						
4) Change						
Add						
Remove						
5) Change						
Add						
Remove						
6) Change						
Add						
Remove						

maen manne	onal sheets, if n	iecessary).	(Be specific)					
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fan amandn	nent provides	for an araba	nau vaalassi	ifiantian an	annaallation	af leenad cha	Pratia'	
nrovisions fo	or implementi	ng the amen	dment if not	contained i	n the amend	nent itself:	103.	
(if not a	plicable, indic	ate N/A)			<u></u>			
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			-					
		<u>.</u>						

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) adoption:	, if other than the
date this document was signed.		
Effective date if applicable:		
	(no more than 90 days after amendment file date)	
Note: If the date inserted in the document's effective date on the	is block does not meet the applicable statutory filing requirements, Department of State's records.	this date will not be listed as the
Adoption of Amendment(s)	(<u>CHECK ONE</u>)	
The amendment(s) was/were action was not required.	adopted by the incorporators, or board of directors without sharehold	der action and shareholder
☐ The amendment(s) was/were by the shareholders was/wer	adopted by the shareholders. The number of votes cast for the amene sufficient for approval.	idment(s)
	approved by the shareholders through voting groups. The following for each voting group entitled to vote separately on the amendment(
"The number of votes of	ast for the amendment(s) was/were sufficient for approval	
by	···	
	(voting group)	
11/11/2 Dated Signature		
sele	a director, president or other officer – if directors or officers have no cted, by an incorporator — if in the hands of a receiver, trustee, or oth ointed fiduciary by that fiduciary)	
	HECTOR CASTELLANO LOPEZ	
	(Typed or printed name of person signing)	
	PRESIDENT	
	(Title of person signing)	