P200000 44186

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A. Butter

COVER LETTER

TO: Amendment Section Division of Corporations

NAME OF CORPO	RATION: Bermudez and Asso	ociates Corp				
DOCUMENT NUM			<u> </u>			
The enclosed Articles	of Amendment and fee are sul	bmitted for filing.				
Please return all corre	spondence concerning this ma	tter to the following:				
	Keila Bermudez					
		Name of Contact Persor	1			
	Bermudez And Associates Corp					
		Firm/ Company				
	2800 Lakeview terrace apt 106					
	Address					
	Margate Florida 33063					
	City/ State and Zip Code					
	bermudez.associates@gmail.com					
	E-mail address: (to be us	ed for future annual report	notification)			
For further information	on concerning this matter, pleas		9918178			
Name	of Contact Person	Area Co) 9918178 de & Daytime Telephone Number			
Enclosed is a check for	or the following amount made	payable to the Florida Depa	artment of State:			
■ \$35 Filing Fee	☐\$43.75 Filing Fee & Certificate of Status	☐\$43.75 Filing Fee & Certified Copy (Additional copy is enclosed)	☐\$52.50 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 810				

Tallahassee, FL 32303

Articles of Amendment to Articles of Incorporation of

Bermudez and Associates Corp (Name of Corporation as currently filed with the Figgetaster of Space) 2: 1, 4 P20000044186 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: name must be distinguishable and contain the word "corporation," "company," or "incorporated" or the abbreviation "('orp.," "Inc.," or Co.," or the designation "Corp," "Inc," or "Co". A professional corporation name must contain the word "chartered," "professional association," or the abbreviation "P.A." 2800 lakeview terrace apt 106 B. Enter new principal office address, if applicable: (Principal office address MUST BE A STREET ADDRESS) Margate Fl 33063 C. Enter new mailing address, if applicable: 2800 lakeview terrace apt 106 (Mailing address MAY BE A POST OFFICE BOX) Margate Fl 33063 D. If amending the registered agent and/or registered office address in Florida, enter the name of the new registered agent and/or the new registered office address: Name of New Registered Agent (Florida street address) New Registered Office Address: 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) (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 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.

Example: X Change	<u>PT</u>	John Doe	
X Remove	\underline{V}	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	D	Alida Bermudez	2800 lakeview terrace apt 106
x Add			Margate Fl 33063
Remove			
2) Change			
Add			
Remove 3) Change			
Add			
Remove			
4) Change	 		
Add			
Remove			4.4. · · ·
5) Change		_	
Add			
Remove			
6) Change			
Add			
Remove			

(Atta	nending or adding additional Articles, enter change(s) here: The additional sheets, if necessary). (Be specific)
. <u>If a</u>	amendment provides for an exchange, reclassification, or cancellation of issued shares,
pre	visions for implementing the amendment if not contained in the amendment itself:
	(if not applicable, indicate N/A)
	

The date of each amendment(s)	doption:	, if other than the
date this document was signed.		
09/ Effective date <u>if applicable</u> :	23/2021	
и аррисави	(no more than 90 days after amendment file o	date)
Note: If the date inserted in this document's effective date on the E	block does not meet the applicable statutory filing require epartment of State's records.	ments, this date will not be listed as the
Adoption of Amendment(s)	(<u>CHECK ONE</u>)	
■ The amendment(s) was/were ac action was not required.	opted by the incorporators, or board of directors without sh	archolder action and shareholder
☐ The amendment(s) was/were ac by the shareholders was/were s	opted by the shareholders. The number of votes cast for the ufficient for approval.	e amendment(s)
	proved by the shareholders through voting groups. The folion reach voting group entitled to vote separately on the amend	
"The number of votes cas	for the amendment(s) was/were sufficient for approval	
by		
	(voting group)	
09/23/202 Dated Signature		
(By a select	director, president or other officer – if directors or officers hed, by an incorporator – if in the hands of a receiver, trustee ited fiduciary by that fiduciary)	
	KEILA BERMUDEZ	
	(Typed or printed name of person signing)	
	PRESIDENT	
	(Title of person signing)	