## PZ000005Z899

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JAN 2 2 2021 S. YOUNG



## **COVER LETTER**

**TO:** Amendment Section Division of Corporations

NAME OF CORPORATI	·	ts of Florida, Inc	
DOCUMENT NUMBER:	P20000052899	<u> </u>	
The enclosed Articles of Ar	mendment and fee are su	bmitted for filing.	
Please return all correspond	lence concerning this ma	tter to the following:	
Carl	os Rodriguez		
Profe	essional Agents of Floric	Name of Contact Person la, Inc	1
8221	SW 101 Ave	Firm/ Company	
Miar	ni, FL. 33173	Address	
		City/ State and Zip Cod	e
Carlo	os.rodriguez2300@gmai	l.com	
···	E-mail address: (to be us	sed for future annual report	notification)
For further information con-	cerning this matter, pleas	se call:	
Carlos Rodriguez		305 at (	588-9485
Name of Co	ntact Person	<del></del>	de & Daytime Telephone Number
Enclosed is a check for 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)
Division o P.O. Box	ent Section of Corporations	Amend Divisio The Co	Address Iment Section on of Corporations entre of Tallahassee N. Monroe Street, Suite 810

Tallahassee, FL 32303

## Articles of Amendment to Articles of Incorporation of

	ntly filed with the Florida	Dept. of State)	
<sup>2</sup> 20000052899			
(Document Numbe	er of Corporation (if known)	· · · · · · · · · · · · · · · · · · ·	
ursuant to the provisions of section 607.1006, Florida Statutes, the Articles of Incorporation:	nis <i>Florida Profit Corporati</i>	ion adopts the following amendmen	
. If amending name, enter the new name of the corporation: lot Applicable	<u>.</u>		
ame must he distinguishable and contain the word "corporation,"	" **	The new	
inc.," or Co.," or the designation "Corp." "Inc.," or "Co". chartered," "professional association," or the abbreviation "P.,	A professional corporati		
Enter new principal office address, if applicable:	Not Applicable		
Principal office address <u>MUST BE A STREET ADDRESS</u> )	Not Applicable		
	Not Applicable		
Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)	Not Applicable		
	Not Applicable		
	Not Applicable		
		e name of the	
new registered agent and/or the new registered office address Not Applicable			
new registered agent and/or the new registered office addre			
Not Applicable  Not Applicable  Not Applicable  Not Applicable  Not Applicable	ess:		
Not Applicable  Not Applicable  Not Applicable  Not Applicable  Not Applicable  (Florida Not Applicable			
Not Applicable  Not Applicable  Not Applicable  Not Applicable  Not Applicable  (Florida	ess: street address)	, Florida	
Not Applicable  Not Applicable  Not Applicable  Not Applicable  Not Applicable  (Florida Not Applicable	ess:		
Not Applicable  Not Applicable  Not Applicable  Not Applicable  Not Applicable  (Florida Not Applicable	ess: street address)	, Florida	
Not Applicable  Not Applicable  Not Applicable  Not Applicable  Not Applicable  Not Applicable  (Florida Not Applicable  Not Applicable	street address) (City)	, Florida	
new registered agent and/or the new registered office address  Not Applicable  Not Applicable  Not Applicable  (Florida Not Applicable  Not Applicable  Not Applicable  Wew Registered Office Address:	ess:  street address)  (City)	, Florida	
new registered agent and/or the new registered office address  Not Applicable  Not Applicable  Not Applicable  (Florida Not Applicable  Not Applicable  Wew Registered Office Address:  ew Registered Agent's Signature, if changing Registered Age	ess:  street address)  (City)	, Florida	
Not Applicable  Not Applicable  Not Applicable  (Florida Not Applicable	ess:  street address)  (City)	, Florida	
new registered agent and/or the new registered office address  Not Applicable  Not Applicable  Not Applicable  (Florida Not Applicable  Not Applicable  Wew Registered Office Address:  ew Registered Agent's Signature, if changing Registered Age	ess:  street address)  (City)	, Florida	
new registered agent and/or the new registered office address Not Applicable  Not Applicable  Not Applicable  (Florida Not Applicable  Not Applicable  Not Applicable  Not Applicable  New Registered Office Address:  ew Registered Agent's Signature, if changing Registered Agentereby accept the appointment as registered agent. I am familia	ess:  street address)  (City)	, Florida	
new registered agent and/or the new registered office address Not Applicable  Not Applicable  Not Applicable  (Florida Not Applicable  Not Applicable  Not Applicable  Not Applicable  New Registered Office Address:  ew Registered Agent's Signature, if changing Registered Agentereby accept the appointment as registered agent. I am familia	ess:  street address)  (City)  ent:  ar with and accept the obliga	, Florida	

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>PT</u>	John Doe	
X Remove	<u>v</u>	Mike Jones	
X Add	<u>sv</u>	Sally Smith	
Type of Action (Check One)	<u>Title</u>	Name	Address
	Mgr	Shannon Cornell	2225 F. Edgewood Dr #4
1) Change X Add			Lakeland, FL 33803
Remove			
2) Change		Not Applicable	
Add			
Remove 3) Change		Not Applicable	
Add			
Remove		N . A . 15 . 14	
4) Change		Not Applicable	
Add			
Remove		Not Applicable	
5) Change		Not Applicable	
Add			
Remove		Not Applicable	
6) Change		-	
Add			
Remove			

E. If amending or adding additional Articles, enter change(s) here:  (Attach additional sheets, if necessary). (Be specific)  Not Applicable				
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F. If an amendment provides for an exc provisions for implementing the am	hange, reclassificati endment if not cont	ion, or cancellation	n of issued shares, dment itself:	
(if not applicable, indicate N/A) Not Applicable				
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•	December 1, 2020
The date of each amendment(s) ad late this document was signed.	ption:, if other tha
Effective date if applicable:	
	(no more than 90 days after amendment file date)
Note: If the date inserted in this blocument's effective date on the Dep	ck does not meet the applicable statutory filing requirements, this date will not be listed a artment of State's records.
Adoption of Amendment(s)	(CHECK ONE)
The amendment(s) was/were adopt action was not required.	ted by the incorporators, or board of directors without shareholder action and shareholder
The amendment(s) was/were adop by the shareholders was/were suf	ted by the shareholders. The number of votes cast for the amendment(s) icient for approval.
must be separately provided for e	oved by the shareholders through voting groups. The following statement such voting group entitled to vote separately on the amendment(s):  r the amendment(s) was/were sufficient for approval
	(voting group)
(By a dir selected, appointe	2/2020  ctor, president er other officer - if directors or officers have not been by an incorporator - if in the hands of a receiver, trustee, or other court I fiduciary by that fiduciary) arlos Rodriguez
- 1	(Typed or printed name of person signing) resident

(Title of person signing)