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## **COVER LETTER**

TO: Amendment Section Division of Corporations

NAME OF CORPO	RATION: ISGO CORP		
	BER: P20000054276		<u> </u>
	s of Amendment and fee are su	bmitted for filing.	
Please return all corre	espondence concerning this ma	tter to the following:	
	OSCAR S RAMIREZ		
	ISGO CORP	Name of Contact Person	1
		Firm/ Company	
	3795 SAN SIMEON CIR		
		Address	
	WESTON FL 33331		
		City/ State and Zip Cod	e
	ISGOCORP@GMAIL.COM		
	E-mail address: (to be us	sed for future annual report	notification)
For further informati	on concerning this matter, pleas	se call:	
OSCAR S RAMIRE	Z	at ( 754	3043077
Name	of Contact Person	Area Co	de & Daytime Telephone Number
Enclosed is a check f	or the following amount made	payable to the Florida Dep	artment of State:
S35 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)
An Div P.C	niling Address nendment Section vision of Corporations D. Box 6327 clahassee, FL 32314	Ameno Divisio The C 2415 I	Address Iment Section on of Corporations entre of Tallahassee N. Monroe Street, Suite 810 assee, FL 32303

## Articles of Amendment to Articles of Incorporation

of

ISGO CORP	
(Name of Corporation as curren	tly filed with the Florida Dept. of State)
220000054276	
(Document Number	of Corporation (if known)
ursuant to the provisions of section 607,1006, Florida Statutes, this Articles of Incorporation:	s Florida Profit Corporation adopts the following amendments
5 Articles of Incorporation.	
. If amending name, enter the new name of the corporation:	
	The new
ame must be distinguishable and contain the word "corporation," Inc.," or Co.," or the designation "Corp," "Inc," or "Co", chartered," "professional association," or the abbreviation "P.A	A professional corporation name must contain the word
B. Enter new principal office address, if applicable:	3795 SAN SIMEON CIR
Principal office address <u>MUST BE A STREET ADDRESS</u> )	WESTON FL 33331
. Enter new mailing address, if applicable:	2705 CAN CINCON CUD
(Mailing address MAY BE A POST OFFICE BOX)	3795 SAN SIMEON CIR
	WESTON FL 33331
). If amending the registered agent and/or registered office ad	dress in Florida, enter the name of the
new registered agent and/or the new registered office addre	<u>ss:</u>
Name of New Registered Agent	
(Florida s	street address)
New Registered Office Address:	, Florida (City) (Zip Code)
	,
lew Registered Agent's Signature, if changing Registered Ager	nt:
hereby accept the appointment as registered agent. I am familia	
	$\beta$
rl	h -
	Design and Associate
Mgnature of New	Registered Agent, if changing

Check if applicable

 $\square$  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 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.

$\frac{X}{X}$ Change	<u>PT</u>	<u>John Doe</u>			
X Remove	<u>v</u>	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) X Change	P	OSCAR S RAMIREZ	3795 SAN SIMEON CIR		
Add			WESTON FL 33331		
Remove					
2) Change	VP	ORLANDO A AZA ADARMES	1239 Fairlake Tree Apt 1316		
Add			Weston FL 33326		
X Remove 3 ) Change	Р	GOLDA E ZALCHENDER	1239 Fairlake Tree, APT 1316		
Add			WESTON FL 33326		
X Remove					
4) Change					
Add					
Remove					
51 Change					
Add			· · · · · · · · · · · · · · · · · · ·		
Remove					
6) Change					
Add					
Remove					

	tach additional sheets, if necessary). (Be specific) e VII
	nitial officer(s) and/or director(s) of the corporation is/arc:
 Fitle:	
OSC	AR S RAMIREZ
 3795	SAN SIMEON CIR
WES	TON FL, 33331 UN
	· · · · · · · · · · · · · · · · · · ·
F. <u>If</u>	an amendment provides for an exchange, reclassification, or cancellation of issued shares, rovisions for implementing the amendment if not contained in the amendment itself:  (if not applicable, indicate N/A)

• •	JULY 15 2020	
The date of each amendment(s) ad	option:	, if other than the
date this document was signed.		
Effective date <u>if applicable</u> :	Y 15 2020	
<u> </u>	(no more than 9)	0 days after amendment file date)
Note: If the date inserted in this bl document's effective date on the De		table statutory filing requirements, this date will 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 l	poard of directors without shareholder action and shareholder
☐ The amendment(s) was/were ado by the shareholders was/were su		e number of votes cast for the amendment(s)
		ough voting groups. The following statement vote separately on the amendment(s):
"The number of votes cast	for the amendment(s) was/we	re sufficient for approval
bv		
-	(voting group)	
selected	rector, president or other office, by an incorporator – if in the	cer – if directors or officers have not been e hands of a receiver, trustee, or other court
	ed fiduciary by that fiduciary	)
	OS CAR S RAMIREZ	
	(Typed or printed	name of person signing)
	PRESIDENT	

(Title of person signing)