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* COVER LETTER

TO: Amendment Section Division of Corporations

NAME OF CORPO	DRATION: ZALDIVAR CON	STRUCTIONS CORP				
DOCUMENT NUM	D20000064631	·				
The enclosed Article	es of Amendment and fee are su	bmitted for filing.				
Please return all corr	espondence concerning this ma	tter to the following:				
	LIDIA E HERNANDEZ					
	Name of Contact Person					
	ZALDIVAR CONSTRUCTIONS CORP					
		Firm/ Company				
	15519 MONTILLA LOOP					
	Address					
	TAMPA FL 33625					
	City/ State and Zip Code					
	hernanle25@yahoo.com					
	E-mail address: (to be us	sed for future annual report	notification)			
For further informati	on concerning this matter, pleas	se call:				
	on concerning this matter, produ	oc can.				
LIDIA E HERNAN	DEZ	at (813	727 9082			
Name of Contact Person			de & Daytime Telephone Number			
Enclosed is a check:	for the following amount made	payable to the Florida Depa	artment of State:			
S35 Filing Fee	\$43.75 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)			
	ailing Address		Address			
	mendment Section		Iment Section			
	vision of Corporations O. Box 6327		on of Corporations entre of Tallahassee			
P.O. BOX 0327		2415 M. Monroe Street, Suite 210				

Tallahassee, FL 32303

高级电影 电声频分子

Articles of Amendment to Articles of Incorporation of

ZALDIVAR CONSTRUCTIONS CORP

(Name of Corporation as current	itly filed with the Florida Dent. of State)	
	,	
0000054531		
(Document Number	of Corporation (if known)	
suant to the provisions of section 607.1006, Florida Statutes, th Articles of Incorporation:	is Florida Profit Corporation adopts the following	amendm
If amending name, enter the new name of the corporation:		
		The ne
ne must be distinguishable and contain the word "corporation," c.," or Co.," or the designation "Corp," "Inc," or "Co". partered," "professional association," or the abbreviation "P.,	A professional corporation name must contain	n "Corp.,
Enter new principal office address, if applicable:	15519 MONTILLA LOOP	
incipal office address MUST BE A STREET ADDRESS)	TAMPA FL 33625	
		
Enter part mailing address if applicables	-	
Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)	15519 MONTILLA LOOP	
	TAMPA FL 33625	
	-	
		382
		2023.
new registered agent and/or the new registered office addre		2023.
If amending the registered agent and/or registered office ac new registered agent and/or the new registered office addre Name of New Registered Agent		2023.
Name of New Registered Agent		2023 . CT AM
<u>Name of New Registered Agent</u>	street address)	2020. 1 63 83 7:

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)

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 Do	<u>ne</u>	
X Remove	\underline{V}	Mike Jo	<u>ones</u>	
X Add	<u>sv</u>	Sally St	<u>nith</u>	
Type of Action (Check One)	<u>Title</u>		<u>Name</u>	<u>Addres</u> s
1) Change	D		LIDIA E HERNANDEZ	
Add				
Remove 2) Change	P	_	LIDIA E HERNANDEZ	15519 MONTILLA LOOP
X Add				TAMPA FL 33625
Remove Change		_		
Add				
Remove				
4) Change	-	-		
Add				
Remove 5) Change				
Add				
Remove				
6) Change		_		
Add				
Remove				

(Attach addition	or adding additional A onal sheets, if necessary,) (Re energific)	ige(s) nere.		
(Miden dadin	onai sheets, if necessary,	i. (De specific)			
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<u> </u>		<u>.</u>			
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16		1			
nravisions f	nent provides for an ex or implementing the ar	change, reclassifi	cation, or cancell	ation of issued sha mondment itself:	res,
(if not a)	pplicable, indicate N/A)	inchia in ingre	omanica in the a	menancia asca:	
			_		
					
					
 -					

	07/28/20120	
The date of each amendment(s) a	doption:	, if other than the
date this document was signed.		
	8/2020	
Effective date <u>if applicable</u> :	(no more than 90 days after amendment file date)	
Note: If the date inserted in this bedocument's effective date on the De	lock does not meet the applicable statutory filing requirements, this department of State's records.	ite will not be listed as the
Adoption of Amendment(s)	(<u>CHECK ONE</u>)	
■ The amendment(s) was/were add action was not required.	opted by the incorporators, or board of directors without shareholder acti	on and shareholder
☐ The amendment(s) was/were add by the shareholders was/were su	opted by the shareholders. The number of votes east for the amendment(ifficient for approval.	(s)
must be separately provided for	proved by the shareholders through voting groups. The following statem each voting group entitled to vote separately on the amendment(s): for the amendment(s) was/were sufficient for approval	ent
	tor the amendment(s) was were surnetent for approval	
by	(voting group)	
Dated	128/2020 Lulin 6. Hernand	
(B) a d selecte	irector, president or other officer – if directors or officers have not been d, by an incorporator – if in the hands of a receiver, trustee, or other counted fiduciary by that fiduciary)	
	LIDIA E HERNANDEZ	
	(Typed or printed name of person signing)	
	PRESIDENT	
	(Title of person signing)	