

P200000055333
11/5/2020
Division of Corporations
Florida Department of State
Division of Corporations
Electronic Filing Cover Sheet

Note: Please print this page and use it as a cover sheet. Type the fax audit number (shown below) on the top and bottom of all pages of the document.

((H20000387310 3))



H200003873103ABCY

Note: DO NOT hit the REFRESH/RELOAD button on your browser from this page. Doing so will generate another cover sheet.

To: Division of Corporations
Fax Number : (850)617-6380

From: Account Name : ALC CONSULTING SERVICES INC
Account Number : I20200000139
Phone : (407)362-8056
Fax Number : (407)386-6503

2020-11-09 01:47:18

****Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please.****

Email Address: ALCCONSULTING01@GMAIL.COM

SECRETARY OF STATE
FALL AGENCY ELECTRONIC FILING

2020 NOV -9 AM 10:41

FILED

**COR AMND/RESTATE/CORRECT OR O/D RESIGN
LAHOU INVESTMENT INC**

Certificate of Status	0
Certified Copy	0
Page Count	05
Estimated Charge	\$35.00

M. SUII KEF

NOV 10 2020

Electronic Filing Menu

Corporate Filing Menu

Help

((H20000387310 3)))

COVER LETTER

TO: Amendment Section
Division of Corporations

NAME OF CORPORATION: LAHOUD INVESTMENT INC

DOCUMENT NUMBER: P20000055353

The enclosed *Articles of Amendment* and fee are submitted for filing.

Please return all correspondence concerning this matter to the following:

LORENA C RIOS

 Name of Contact Person

ALC CONSULTING SERVICES INC

 Firm/ Company

10907 MOSS PARK RD UNIT 1027

 Address

ORLANDO, FL 32832

 City/ State and Zip Code

ALCCONSULTING01@GMAIL.COM

 E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

LORENA C RIOS _____ at (407) 362-8056
 Name of Contact Person Area Code & Daytime Telephone Number

Enclosed is a check for the following amount made payable to the Florida Department 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

((H20000387310 3)))

((H20000387310 3)))

Articles of Amendment
to
Articles of Incorporation
of

LAIHOUD INVESTMENT INC

(Name of Corporation as currently filed with the Florida Dept. of State)

P20000055353

(Document Number of Corporation (if known))

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:

N/A

The new name must be distinguishable and contain the word "corporation," "company," or "incorporated" or the abbreviation "Corp.," "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."

B. Enter new principal office address, if applicable:
(Principal office address MUST BE A STREET ADDRESS)

N/A

C. Enter new mailing address, if applicable:
(Mailing address MAY BE A POST OFFICE BOX)

N/A

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 N/A

(Florida street address)

New Registered Office Address: _____, Florida _____
(City) (Zip Code)

2020 NOV -9 AM 10:41
SECRETARY OF STATE
TALLahassee, FLORIDA

FILED

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.

((H20000387310 3)))

((H20000387310 3)))

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:

<input checked="" type="checkbox"/> Change	<u>PT</u>	<u>John Doe</u>
<input type="checkbox"/> Remove	<u>V</u>	<u>Mike Jones</u>
<input checked="" type="checkbox"/> Add	<u>SV</u>	<u>Sally Smith</u>

<u>Type of Action</u> (Check One)	<u>Title</u>	<u>Name</u>	<u>Address</u>
1) <input type="checkbox"/> Change	<u>VP</u>	<u>VILMA MARIA LAO</u>	<u>10637 BASTILLE LN APT 102</u>
<input checked="" type="checkbox"/> Add			<u>ORLANDO, FL 32836</u>
<input type="checkbox"/> Remove			<u></u>
2) <input type="checkbox"/> Change	<u></u>	<u></u>	<u></u>
<input type="checkbox"/> Add			<u></u>
<input type="checkbox"/> Remove			<u></u>
3) <input type="checkbox"/> Change	<u></u>	<u></u>	<u></u>
<input type="checkbox"/> Add			<u></u>
<input type="checkbox"/> Remove			<u></u>
4) <input type="checkbox"/> Change	<u></u>	<u></u>	<u></u>
<input type="checkbox"/> Add			<u></u>
<input type="checkbox"/> Remove			<u></u>
5) <input type="checkbox"/> Change	<u></u>	<u></u>	<u></u>
<input type="checkbox"/> Add			<u></u>
<input type="checkbox"/> Remove			<u></u>
6) <input type="checkbox"/> Change	<u></u>	<u></u>	<u></u>
<input type="checkbox"/> Add			<u></u>
<input type="checkbox"/> Remove			<u></u>

((H20000387310 3)))

((H20000387310 3))

UPON FILING

The date of each amendment(s) adoption: _____ if other than the date this document was signed.

Effective date if applicable: 11-08-2020
(no more than 90 days after amendment file date)

Note: If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as the document's effective date on the Department of State's records.

Adoption of Amendment(s) (CHECK ONE)

- The amendment(s) was/were adopted by the incorporators, or board of directors without shareholder action and shareholder action was not required.
- The amendment(s) was/were adopted by the shareholders. The number of votes cast for the amendment(s) by the shareholders was/were sufficient for approval.
- The amendment(s) was/were approved by the shareholders through voting groups. *The following statement must be separately provided for each voting group entitled to vote separately on the amendment(s):*

"The number of votes cast for the amendment(s) was/were sufficient for approval
by _____"
(voting group)

Dated 11-08-2020

Signature Diego A. Lahoud Lao

(By a director, president or other officer – if directors or officers have not been selected, by an incorporator – if in the hands of a receiver, trustee, or other court appointed fiduciary by that fiduciary)

DIEGO A LAHOUD LAO

(Typed or printed name of person signing)

PRESIDENT

(Title of person signing)

((H20000387310 3))