(Requestor's Name)
(Address)
(Address)
(City/State/Zip/Phone #)
PICK-UP WAIT MAIL
(Business Entity Name)
(Document Number)
Certified Copies Certificates of Status
Special Instructions to Filing Officer.

Office Use Only



900368282439

06/30/21--01002--006 **35.00

5071

COVER LETTER

TO: Amendment Section Division of Corporations

NAME OF CORPORATION: MORALESBROC	FAM, INC.			
DOCUMENT NUMBER:				
The enclosed Articles of Amendment and fee are su	bmitted for filing.			
Please return all correspondence concerning this ma	tter to the following:			
CARLOS GARCIA				
	Name of Contact Perso	on		
CARLOS GARCIA P.A.				
 	Firm/ Company			
500 SOUTH DIXI HWY. SU	ITE 202			
-	Address			
CORAL GABLES, FLORIDA 33146				
	City/ State and Zip Coo	de		
CARLOS@CGPALAW,COM	4			
E-mail address: (to be us	ed for future annual repor	t notification)		
For further information concerning this matter, pleas	e call:			
CARLOS GARCIA	at (³⁰⁵	7792479		
Name of Contact Person	Area Co	de & Daytime Telephone Number		
Enclosed is a check for the following amount made p	payable to the Florida Dep	artment of State:		
\$35 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	Amend Division 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

MORALESBROC FAM, INC.	Ü.			
(Name	of Corporation as currentl	y filed with the Florida Dept	. of State)	
P20000059821				
	(Document Number of	Corporation (if known)		
Pursuant to the provisions of section 607 its Articles of Incorporation:	.1006, Florida Statutes, this a	Florida Profit Corporation ac	lopts the following ame	ndment(s) to
A. If amending name, enter the new n	ume of the corporation:			
name must be distinguishable and contain "Inc.," or Co.," or the designation "Cothartered," "professional association,"	Corp," "Inc," or "Co". A	professional corporation ne	or the abbreviation "Co	new orp.," word
B. Enter new principal office address, if applicable: (Principal office address MUST BE A STREET ADDRESS)		848 BRICKELL AVE. SU	ITE 625	
		MIAMI, FL 33131		
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)		848 BRICKELL AVE. SU	ITE 625	
		MIAMI, FL 33131		_
				
D. If amending the registered agent are			ne of the	
new registered agent and/or the new registered office address CARLOS GARCIA P.A Name of New Registered Agent				
	500 SOUTH DIXIE HWY.	SUITE 202		
	(Florida str	eet address)		. •
New Registered Office Address:	CORAL GABLES		, Florida	
		(City)	(Zip Code)	; _>
New Registered Agent's Signature, if c I hereby accept the appointment as regist			s of the position.	1410: 45
	Signature of New Ri	political Angli if changing		

Check if applicable

The amendment(s) is/are being filed pursuant to s. 607 0120 (11) (c). E.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	<u>v</u>	Mike Jones	
X Add	<u>\$V</u>	Sally Smith	
Type of Action (Check One)	Title	<u>Name</u>	<u>Addres</u> s
1)Shange			
Add			
Remove			
2) Change	7		
Add	`		/
Remove 3) Change			
Add			
Remove		\times	
4) Change			
Add			
Remove		`	\
5) Change		-/	
Add			
Remove			
6) Change			
Add			
Remove			

	e) horo:
If amending or adding additional Articles, enter change() Attach additional sheets, if necessary). (Be specific)	31 1101 0.
(De Specific)	
	
	
	/ ·
X	
,	
	_
f an amendment provides for an exchange, reclassification	on, or cancellation of issued shares,
<u>provisions for implementing the amendment if not conta</u>	on, or cancellation of issued shares, tined in the amendment itself:
f an amendment provides for an exchange, reclassification provisions for implementing the amendment if not contact (if not applicable, indicate N/A)	on, or cancellation of issued shares, tined in the amendment itself:
<u>provisions for implementing the amendment if not conta</u>	on, or cancellation of issued shares, tined in the amendment itself:
<u>provisions for implementing the amendment if not conta</u>	on, or cancellation of issued shares, lined in the amendment itself:
<u>provisions for implementing the amendment if not conta</u>	on, or cancellation of issued shares, tined in the amendment itself:
<u>provisions for implementing the amendment if not conta</u>	on, or cancellation of issued shares, kined in the amendment itself:
<u>provisions for implementing the amendment if not conta</u>	on, or cancellation of issued shares, sined in the amendment itself:
<u>provisions for implementing the amendment if not conta</u>	on, or cancellation of issued shares, tined in the amendment itself:
<u>provisions for implementing the amendment if not conta</u>	on, or cancellation of issued shares, tined in the amendment itself:
<u>provisions for implementing the amendment if not conta</u>	on, or cancellation of issued shares, tined in the amendment itself:
<u>provisions for implementing the amendment if not conta</u>	on, or cancellation of issued shares, tined in the amendment itself:
<u>provisions for implementing the amendment if not conta</u>	on, or cancellation of issued shares, sined in the amendment itself:
provisions for implementing the amendment if not conta	on, or cancellation of issued shares, sined in the amendment itself:
provisions for implementing the amendment if not conta	on, or cancellation of issued shares, sined in the amendment itself:
f an amendment provides for an exchange, reclassification provisions for implementing the amendment if not contact (if not applicable, indicate N/A)	on, or cancellation of issued shares, sined in the amendment itself:
provisions for implementing the amendment if not conta	on, or cancellation of issued shares, sined in the amendment itself:

	06/23/2021	
	endment(s) adoption:	if other than the
date this document wa		
	06/23/2021	
Effective date if appl		
	(no more than 90 days after amendment file date)	
Note: If the date inseduction of the document's effective of	erted in this block does not meet the applicable statutory filing requirements, this date date on the Department of State's records.	e will not be listed as the
Adoption of Amenda	ment(s) (CHECK ONE)	
The amendment(s) action was not requ	was/were adopted by the incorporators, or board of directors without shareholder action uired.	n and shareholder
☐ The amendment(s) by the shareholder	was/were adopted by the shareholders. The number of votes east for the amendment(s) was/were sufficient for approval.)
☐ The amendment(s) nust be separately	was/were approved by the shareholders through voting groups. The following statement provided for each voting group entitled to vote separately on the amendment(s):	ıt
"The number	of votes cast for the amendment(s) was/were sufficient for approval	
by		
	(voting group)	
Date	ed 6 23/2021	
Sign	nature Skoral S.	
	(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)	
	SANTIAGO MORALES BROC	
	(Typed or printed name of person signing)	
	DIRECTOR	
	(Title of person signing)	