## P20000062665

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## **COVER LETTER** -

Division of Corporations NAME OF CORPORATION: THE EXPORTS CORP DOC The er Please

TO: Amendment Section

DOCUMENT NUM	IBER: P20000062665		<del></del> .
The enclosed Article	s of Amendment and fee are su	bmitted for filing.	
Please return all corr	espondence concerning this ma	itter to the following:	
	JOSE ALBERTO IRALA O	RTEGA	
	$\overline{\mathcal{A}}$	Name of Contact Person	<u> </u>
	<del>-                                    </del>	Firm/ Company	
	7229 NW 102ND PL		
		Address	
	DORAL, FLORIDA, 33178		
		City/ State and Zip Code	}
	THCEXPORTSCORP@GM	AIL.COM	
	E-mail address: (to be us	sed for future annual report	notification)
For further informati	on concerning this matter, pleas	se call:	
JOSE ALBERTO IR	ALA ORTEGA	at ( ' !	7864910448
Name of Contact Person		Area Coo	de & Daytime Telephone Number
Enclosed is a check f	or the following amount made	payable to the Florida Depa	irtment of State:
■ \$35 Filing Fee	□\$43.75 Filing Fee & Certificate of Status	S 43.75 Filing Fee & Certified Copy (Additional copy is enclosed)	\$52.50 Filing Fee Certificate of Status Certified Copy (Additional Copy is enclosed)
Мі	ailing Address	Street	Address

Amendment Section **Division of Corporations** P.O. Box 6327 Tallahassee, FL 32314

Amendment Section Division of Corporations The Centre of Tallahassee 2415 N. Monroe Street, Suite 810 Tallahassee, FL 32303

## **Articles of Amendment** to

$\neg$	HC EXI	orts corp		
(Name o	of Corporation as current	tly filed with the Florida Dept. of State)		
	P2 000	CC0421.115		
	(Document Number	of Corporation (if known)		
Pursuant to the provisions of section 607. ts Articles of Incorporation:	1006, Florida Statutes, this	Florida Profit Corporation adopts the following amendment(s) to		
A. If amending name, enter the new na	ame of the corporation:			
	Corp," "Inc." or "Co".	"company," or "incorporated" or the abbreviation "Corp.," A professional corporation name must contain the word "		
B. <u>Enter new principal office address.</u>	if applicable:	7229 NW 102ND PL		
(Principal office address MUST BE A STREET ADDRESS)		DORAL FLORIDA 33178		
C. Enter new mailing address, if appli (Mailing address MAY BE A POST		7229 NW 102ND PL		
		DORAL FLORIDA 33178		
		<del></del>		
D. If amending the registered agent an	dar registered affice add	dress in Elevida enter the name of the		
new registered agent and/or the nev	y registered office addres	3:		
Name of New Registered Agent	JOSE ALBERTO IRALA	A ORTEGA		
	7229 NW 102ND PL			
	(Florida s	treet address)		
New Registered Office Address: DORAL		Florida 33178		
		(City) (Zip Code)		
New Registered Agent's Signature, if c	hanging Registered Agen	t·		
		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.

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:

 $P = President; \ V = Vice \ President; \ \widetilde{I} = Ireasurer; \ S = Secretary; \ D = Director; \ TR = Trustee; \ C = Chairman or Clerk; \ CEO = Chief Executive Officer; \ CFO = Chief Financial Officer. If an officer/director holds more than one title, list the first letter of each office held. President, Treasurer, Director would be PTD.$ 

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> P T</u>	<u>Jahn Doe</u>	
X Remove	<u>V</u>	Mike Jones	
_X Add	<u> </u>	Sally Smith	
Type of Action (Check One)	<u>Title</u>	<u>Name</u>	<u>Addres</u> s
1) Change	Р	THAIS ANDREINA CHACON SUA	10262 NW 71ST TERRACE
Add			DORAL, FL, 33178
X Remove			
2) Change	P	JOSE ALBERTO IRALA ORTEGA	7229 NW 102ND PL
X Add			DORAL FL 33178
Remove 3) Change			
Add			
Remove			
4) Change		<del>_</del>	
Add			
Remove			
5) Change	_		
Add			
Remove			
6) Change			
Add			- <del></del>
Remove			

amending or adding additional ttach additional sheets, if necess	sary). (Be specific)	<del></del>		
				<del></del>
				<del></del>
-			·	
<del></del>	<del></del>			
<del></del>		<u> </u>		
	·			
<del></del>				
f an amendment provides for a	n exchange, reclassification	on, or cancellation of issue	ed shares,	
		<u>sined in the amendment it</u>	<u>self:</u>	
provisions for implementing th	i <del>e amenoment ii not conta</del> //A\			
provisions for implementing th (if not applicable, indicate N	ie amendment ii not conta V/A)			
provisions for implementing th	le amendment il not conta V/A)			
provisions for implementing th	le amendment il not conta			
provisions for implementing th	le amendment il not conta			
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provisions for implementing th	e amendment ii not conta			
provisions for implementing th	e amendment ii not conta			

The date of each amendment(s) adopti	on:	, if other than the
date this document was signed.		
10/19/20:	20	
Effective date if applicable:	(no more than 90 days after amendment file date)	
Note: If the date inserted in this block document's effective date on the Departr	does not meet the applicable statutory filing requirements, this date nent of State's records.	will not be listed as the
Adoption of Amendment(s)	(CHECK ONE)	
☐ The amendment(s) was/were adopted action was not required.	by the incorporators, or board of directors without shareholder action	and shareholder
The amendment(s) was/were adopted by the shareholders was/were sufficients	by the shareholders. The number of votes cast for the amendment(s) ent for approval.	
☐ The amendment(s) was/were approve must be separately provided for each	d by the shareholders through voting groups. <i>The following statemen</i> a voting group entitled to vote separately on the amendment(s):	nt
"The number of votes cast for the	ne amendment(s) was/were sufficient for approval	
by THAIS ANDREINA CHA	CON SUAREZ	
uy	(voting group)	
Dated	iaisacHs	
selected, by	or, president or other officer – if directors or officers have not been an incorporator – if in the hands of a receiver, trustee, or other court duciary by that fiduciary)	
TH	AIS ANDREINA CHACON SUAREZ	
_	(Typed or printed name of person signing)	
PRI	ESIDENT	
	(Title of person signing)	