P200000 66880

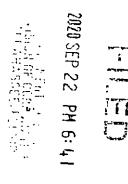
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OCT 3 0 2020 S. YOUNG

COVER LETTER

TO: Amendment Section Division of Corporations

NAME OF CORPOR	RATION: COJ GROUP COR	RP	
DOCUMENT NUME			
	of Amendment and fee are su	bmitted for filing.	
Please return all corres	pondence concerning this ma	tter to the following:	
	JORGE ORTIZ		
		Name of Contact Perso)II
		Firm/ Company	
	4571 WILLOW RUN WAY		
•		Address	
	LAKE WORTH, FL 33467		
		City/ State and Zip Coc	le
	ITALFONSO@COMCAST.	NET	
•	E-mail address: (to be us	sed for future annual repor	t notification)
For further information	concerning this matter, pleas	se call:	
MIRIAM FIGUEROA		at (7924519
Name of Contact Person		Area Co	ode & Daytime Telephone Number
Enclosed is a check for	the following amount made	payable to the Florida Dep	partment 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)
Ame Divis P.O.	ing Address adment Section ion of Corporations Box 6327 hassee, FL 32314	Ameno Divisio The C 2415 i	Address diment Section on of Corporations fentre of Tallahassee N. Monroe Street, Suite 810 assee, FL 32303

Articles of Amendment to Articles of Incorporation of

COJ GROUP CORP	
(Name of Corporation as curr	rently filed with the Florida Dept. of State)
P20000066880	
(Document Numb	per of Corporation (if known)
Pursuant to the provisions of section 607,1006, Florida Statutes, its Articles of Incorporation:	this Florida Profit Corporation adopts the following amendment(s) to
A. If amending name, enter the new name of the corporation	<u>n:</u>
	The new
name must be distinguishable and contain the word "corporation "Inc.," or Co.," or the designation "Corp," "Inc," or "Co "chartered," "professional association," or the abbreviation "I	". A professional corporation name must contain the word
B. Enter new principal office address, if applicable:	
(Principal office address <u>MUST BE A STREET ADDRESS</u>)	020
C. Enter new mailing address, if applicable:	N
(Mailing address MAY BE A POST OFFICE BOX)	110 ½ Å
	·
D. If amending the registered agent and/or registered office new registered agent and/or the new registered office add	
Name of New Registered Agent	
(Floria	la street address)
New Registered Office Address:	. Florida
The state of the s	(City) (Zip Code)
New Registered Agent's Signature, if changing Registered A	
I hereby accept the appointment as registered agent. I am fami	yar with and accept the obligations of the position.
Signature of No	ew 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)

Evample:

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.

\underline{X} Change	<u>PT</u>	John Doe		
X Remove	$\underline{\mathbf{V}}$	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	ORTIZ ARDILA, JORGE E		
Add				
Remove 2) X Change	VP	ORTIZ JARA, CARLOS A		
Add				
Remove 3) Change				
Add				
Remove 4) Change				
Add				
Remove				
5) Change				
Add				
Remove				
6) Change Add				
Remove				

Attach additional sheets, if nece	nal Articles, enter change(s) he wsary). (Be specific)		
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	*		
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			_
			
			
		-	
an amendment provides for	an exchange raclassification of	r cancellation of issued shares,	
provisions for implementing t	he amendment if not contained	in the amendment itself:	
(if not applicable, indicate)	N/A)		
			
			 -
			
· -			
412			

	09/16/2020	
The date of each amendment(s):	doption:, if other that	n the
date this document was signed.		
	16/2020	
Effective date <u>if applicable</u> :	(no more than 90 days after amendment file date)	
Note: If the date inserted in this document's effective date on the D	block does not meet the applicable statutory filing requirements, this date will not be listed a epartment of State's records.	s the
Adoption of Amendment(s)	(CHECK ONE)	
■ The amendment(s) was/were ad action was not required.	opted by the incorporators, or board of directors without shareholder action and shareholder	
☐ The amendment(s) was/were ad by the shareholders was/were s	opted by the shareholders. The number of votes east for the amendment(s) afficient for approval.	
The amendment(s) was/were ap must be separately provided for	proved by the shareholders through voting groups. The following statement 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)	
09/16/2020 Dated Signature	06	
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 court seed fiduciary by that fiduciary)	
	JORGE E ORTIZ	
	(Typed or printed name of person signing)	
	PRESIDENT	
	(Title of person signing)	