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To:

Division of Corporations

Fax Number : (850)617-6380

From:

Account Name : SERVICELL WIRELESS REPAIR CENTER, CORP.

Account Number : I20160000091

Phone Fax Number : (305)635-9694 : (305)635-9868

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

## COR AMND/RESTATE/CORRECT OR O/D RESIGN THE ROYALE COCONUT CORP

Certificate of Status	1
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## Articles of Amendment · to Articles of Incorporation

UNDING	of Corporation as current	ly filed with the Florida Dept. of State)	
20000079539		The west the X to the Dept. of Scate	
	Mocument Number of	of Corporation (if known)	
		- ,	
ursuant to the provisions of section 607 s Articles of Incorporation:	7.1006, Florida Statutes, this	Florida Profit Corporation adopts the foll	owing amendment(
. If amending name, enter the new r	name of the corporation:		
OYALE COCONUT CORP			
nme must be distinguishable and contai Inc.," or Co.," or the designation " chartered," "professional association,	Corp," "Inc," or "Co". A	company," or "incorporated" or the abbre A professional corporation name must co "	The new viation "Corp.," ontain the word
B. Enter new principal office address, if applicable:			
rincipal office address MUST BE A S	STREET ADDRESS)	<del></del>	
			<del></del>
Enter new mailing address, if app (Mailing address MAY BE A POST	licable: OFFICE BOX)	N/A	
		- · · · ·	~,
If amending the registered agent an new registered agent and/or the ne	nd/or registered office address	ress in Florida, enter the name of the	
	N/A	<u> </u>	• •
Name of New Registered Agent			<del></del>
	(Florida str	eet address)	
		•	
New Registered Office Address:	N/A·	(City), Florida	

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;3056359868

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	PT John	1 Doe	
X Remove	<u>V</u> <u>Mik</u>	e Jones	
_X Add	SV Sall	<u>v Smith</u>	•
Type of Action (Check One)	<u>Title</u>	Name	<u>Addres</u> s
1) Change		N/A	N/A
A.dd			
Remove			
2) Change	<del></del>		
Add			
Remove 3) Change			
Add			
Remove			
4) Change			
Add	•		
Remove			
5)Change	<del></del>		<u></u>
Add			
Remove			
6)Change			
Add			
Remove			

. If amending or adding additional Articles, enter change(s) here:	45000035862
(Attach additional sheets, if necessary). (Be specific)	
/A	
If an amendment provides for an exchange, reclassification, or cancell provisions for implementing the amendment if not contained in the an	ation of issued shares,
(If not applicable, indicate N/A)	menanient usen:
1	
	· · · · · · · · · · · · · · · · · · ·
	<del></del> _

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•	10/14/2020		
The date of each amendment(s) date this document was signed.	adoption:		, if other than the
10. Effective date <u>if applicable</u> :	/14/2020		
Firective date if abbugable:	(no more than	n 90 days after amendment file date)	·
Note: If the date inserted in this document's effective date on the I	block does not meet the app Department of State's records	plicable statutory filing requirements, this s.	date will not be listed as the
Adoption of Amendment(s)	(CHECK ONE)		
The amondment(s) was/were as action was not required.	dopted by the incorporators, o	or board of directors without shareholder a	ction and shareholder
☐ The amendment(s) was/were as by the shareholders was/were		The number of votes cast for the amendme	nt(s)
		through voting groups. The following state to vote separately on the amendment(s):	ment
"The number of votes cas	st for the amendment(s) was/	were sufficient for approval	
by		<b>"</b>	
	(voting group)	<del>.</del>	
10/14/202	0		
Dated	-	<del></del>	
Signature	ules Rous		
(By a select	director, president or other of	flicer – if directors or officers have not been the hands of a receiver, trustee, or other educy)	n purt
	CARLOS J RAMOS		
	(Typed or printe	ed name of person signing)	
·	PRESIDENT		
	(Title of person	signing)	·