## P20000081325

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## **COVER LETTER**

. TO: Amendment Section

Division of Corporations NAME OF CORPORATION: SIMON PARRILLA EVENTS INC DOCUMENT NUMBER: P20000081325 The enclosed Articles of Amendment and fee are submitted for filing. Please return all correspondence concerning this matter to the following: HERNAN MEJIA Name of Contact Person TAX ZONE INC Firm/ Company 8865 COMMODITY CIR STE 4 Address ORLANDO FL 32819 City/ State and Zip Code ADMIN@TAXZONEFL.COM E-mail address: (to be used for future annual report notification) For further information concerning this matter, please call: HERNAN MEJIA Name of Contact Person Enclosed is a check for the following amount made payable to the Florida Department of State: ■ \$35 Filing Fee □\$43.75 Filing Fee & ☐ \$43.75 Filing Fee & □\$52.50 Filing Fee Certificate of Status Certified Copy Certificate of Status (Additional copy is Certified Copy enclosed) (Additional Copy is enclosed) Mailing Address Street Address Amendment Section Amendment Section

Division of Corporations

Tallahassee, FL 32303

The Centre of Tallahassee

2415 N. Monroe Street, Suite 810

Division of Corporations

Tallahassee, FL 32314

P.O. Box 6327

## Articles of Amendment to Articles of Incorporation of

SIMON PARRILLA EVENTS INC 2021 FEB -9 AH 9: 23 (Name of Corporation as currently filed with the Florida Dept. of State) SECRETARY P20000081325 (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: SIMON PARRANDA INC 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) C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX) 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 (Florida street address) New Registered Office Address: (City) (Zip Code) 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

 $\Box$  The amendment(s) is/are being filed pursuant to s. 607.0120 (11) (e), F.S.

P = President; V= Vice I Executive Officer; CFO = President, Treasurer, Dir Changes should be noted	President Chief Firector wor in the for vex the co	llowing manner. Currently John Doe is listed as the P orporation, Sally Smith is named the V and S. These sl	one title, list the first letter of each office held  ST and Mike Jones is listed as the V. There is
X Change	<u>PT</u>	John Doe	
X Remove	<u>V</u>	Mike Jones	
_X Add	<u>sv</u>	Sally Smith	
Type of Action (Check One)	Title	<u>Name</u>	Address
1) Change			
Add			
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2) Change		<u> </u>	
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6) Change			
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If amending the Officers and/or Directors, enter the title and name of each officer/director being removed and title, name, an

address of each Officer and/or Director being added:

· Please note the officer/director title by the first letter of the office title:

(Attach additional sheets, if necessary)

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02-04-2021	
The date of each amendment(s) adoption: date this document was signed.	, if other than the
02-04-2021	
Effective date if applicable:	
(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 dat document's effective date on the Department of State's records.	e will not be listed as th
Adoption of Amendment(s) (CHECK ONE)	
■ The amendment(s) was/were adopted by the incorporators, or board of directors without shareholder action action was not required.	n and shareholder
☐ 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):	nt
"The number of votes cast for the amendment(s) was/were sufficient for approval	
by	
(voting group)	
Dated	
(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)	
HERNAN MEJIA	
(Typed or printed name of person signing)	
PRESIDENT	
(Title of person signing)	<del></del>