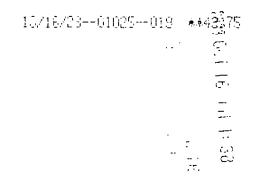
P20000081656

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

Office Use Only



400417433824





COVER LETTER

TO: Amendment Section Division of Corporations

NAME OF CORPO	ORATION: UNITED LINES, I	INC			
	1BER: P20000081656				
	es of Amendment and fee are su	sbmitted for filing.			
Please return all corn	respondence concerning this ma	atter to the following:			
	RAFAEL GARCIA PEREZ				
		Name of Contact Person			
	UNITED LINES, INC				
		Firm/ Company			
	4646 LANDSCAPE DR				
		Address			
	TAMPA, FL 33624				
		City/ State and Zip Code			
	unitedlinesinc@gmail.com				
	E-mail address: (to be us	sed for future annual report notification)			
For further informat	ion concerning this matter, pleas	se call:	 ت		
RAFAEL GARCIA PEREZ		at (561 2939737			
Name of Contact Person		Area Code & Daytime Telephone Number			
Enclosed is a check	for the following amount made	payable to the Florida Department of State:	-· _ (
□ \$35 Filing Fee	■\$43.75 Filing Fee & Certificate of Status	S43.75 Filing Fee & S52.50 Filing Fee Certified Copy (Additional copy is cnclosed) S52.50 Filing Fee Certificate of Status Certified Copy (Additional Copy is enclosed)			
Mailing Address Amendment Section Division of Companions		Street Address			
		Amendment Section			
1 33	VISIO OLI OPPOSSIONE	Linuaron of Compositions			

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 Articles of Incorporation of

UNITED LINES, INC			
(Name of C	Corporation as currently	filed with the Florida Dept. of State)	
P20000081656			
	(Document Number of C	Corporation (if known)	
Pursuant to the provisions of section 607.100 its Articles of Incorporation:	06, Florida Statutes, this Fl	dorida Profit Corporation adopts the follow	ing amendment(s) to
A. If amending name, enter the new nam	e of the corporation:		
N/A			The new
name must be distinguishable and contain the "Inc.," or Co.," or the designation "Cor "chartered," "professional association," or	p, " "Inc," or "Co". A	mpany, "or "incorporated" or the abbrevial professional corporation name must contain	tion "Corp"
B. Enter new principal office address, if a (Principal office address MUST BE A STR		N/A	
C. Enter new mailing address, if applical (Mailing address MAY BE A POST OF		N/t	
D. If amending the registered agent and/o new registered agent and/or the new r	or registered office addre egistered office address:	ss in Florida, enter the name of the	· · · · · · · · · · · · · · · · · · ·
Name of New Registered Agent	N/A		
			~
	(Florida stree	t address)	
New Registered Office Address:	_	, Florida	-
	(0	City) (Zi _t	Code)
New Registered Agent's Signature, if char I hereby accept the appointment as registere	nging Registered Agent: ed agent. I am familiar wid	th and accept the obligations of the position	
	Signature of New Reg	ristered Agent, if changing	_

Check if applicable

The amendment(s) is/are being filed pursuant to s. 607.0120 (11) (c), 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)

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 Doc	
X Remove	<u>v</u>	Mike Jones	
X Add	<u>sv</u>	Sally Smith	
Type of Action (Check One)	<u>Title</u>	<u>Name</u>	Address
1) Change	P	ADIANEZ NODARSE RAMIREZ	4646 LANDSCAPE DR
Add			TAMPA, FL 33624
X Remove			
2) X Change	P	RAFAEL GARCIA PEREZ	4646 LANDSCAPE DR
Add			TAMPA, FL 33624
Remove 3) Change			
Add			
Remove			
4) Change			· •
Add			ير.
Remove			<u> </u>
5) Change			
Add			
Remove			
6) Change			
Add			
Remove			

The date of each amendmen	AUGUST 7, 2023	
date this document was signed	i.	_, if other than the
Effective date if applicable:	AUGUST 7, 2023	
	(no more than 90 days after amendment file date)	
Note: If the date inserted in document's effective date on t	this block does not meet the applicable statutory filing requirements, this date will the Department of State's records.	not be listed as the
Adoption of Amendment(s)	(CHECK ONE)	
The amendment(s) was/we action was not required.	re adopted by the incorporators, or board of directors without shareholder action and s	hareholder
☐ The amendment(s) was/we by the shareholders was/w	re adopted by the shareholders. The number of votes cast for the amendment(s) ere sufficient for approval.	
☐ The amendment(s) was/weinust be separately provide	re approved by the shareholders through voting groups. The following statement ed for each voting group entitled to vote separately on the amendment(s):	
"The number of votes	s cast for the amendment(s) was/were sufficient for approval	
by		
	(voting group)	
Dated	UST 7, 2023	
se	y a director, president or other officer – if directors or officers have not been lected, by an incorporator – if in the hands of a receiver, trustee, or other court pointed fiduciary by that fiduciary)	-
_	RAFAEL GARCIA PEREZ	
	(Typed or printed name of person signing)	 ;
	PRESIDENT	
	(Title of person signing)	<u></u>