## P20000091535

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## **COVER LETTER**

Division of Corporations NAME OF CORPORATION: Sol Bulla Inans pont comp 120000091535 DOCUMENT NUMBER: The enclosed Articles of Amendment and fee are submitted for filing. Please return all correspondence concerning this matter to the following: For further information concerning this matter, please call: Longov 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

TO: Amendment Section

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

Street Address

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

## Articles of Amendment Articles of Incorporation

(Name of Corporation as curre	ently filed with the Florida Dept. of Sta	te)
, (Document Number	er of Corporation (if known)	
Pursuant to the provisions of section 607,1006, Florida Statutes, t its Articles of Incorporation:	his Florida Profit Corporation adopts the	e following amendment(s) to
A. If amending name, enter the new name of the corporation	<u>i</u>	
		The new
name must be distinguishable and contain the word "corporation, "Inc.," or Co.," or the designation "Corp," "Inc.," or "Co".	. A professional corporation name mi	
"chartered," "professional association," or the abbreviation "P.	.A.	77 12
B. Enter new principal office address, if applicable:		T 4.0
(Principal office address MUST BE A STREET ADDRESS)		
		<u> </u>
C. Pater and an Star address Star attack to		<u> </u>
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)		
(Mailing dualess MAT DE AT OST OFFICE DOA)		
		•
D. If amending the registered agent and/or registered office a		<u>e</u>
new registered agent and/or the new registered office addi	ress:	
Name of New Registered Agent		
Name of New Regimered Agem		
(Floride	a street address)	
V 0 1 10m 411	E) (1	
New Registered Office Address:	, Florid , Florid	a (Zip Code)
	(City)	(Zip Couci
New Registered Agent's Signature, if changing Registered Ag		
I hereby accept the appointment as registered agent.—I am famili	iar with and accept the obligations of the	position.
Signature of Nev	w Registered Agent, if changing	
ingamme of the	مواريد فوارييون والمانية المنتبية المانية المانية المنتبية	

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)

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)	Title	Name	<u>Addres</u> s
1) Change		Dayana Olano	9412 hw 120 st Apt 12
X Add		i	HIALIAH, FL, 33018
Remove			
2) Change			
Add			
Remove Change			
Add			
Remove			
4) Change		_	
Add			
Remove			
5) Change			
Add			
Remove			
6) Change			
Add			
 Remove			

If amending or adding additional Art (Attach additional sheets, if necessary).	(Be specific)	
If an amendment provides for an exch provisions for implementing the ame (if not applicable, indicate N/A)	change, reclassification, or cancellation of issued shares, endment if not contained in the amendment itself:	

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The date of each amendment(s) adoption: 7/00/004, if other than the date this document was signed.
Effective date if applicable: 93000 (no more than 90 days after amendment file date)
Effective date if applicable: 10100 (no more than 90) days after amendment file date)
<b>Note:</b> If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as the document's effective date on the Department of State's records.
Adoption of Amendment(s) ( <u>CHECK ONE</u> )
☐ The amendment(s) was/were adopted by the incorporators, or board of directors without shareholder action and shareholder action was not required.
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):
"The number of votes cast for the amendment(s) was/were sufficient for approval
by``
(voting group)
Dated 9/30/30/
Signature
(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 figure far in the finance of a receiver, trustee, or other count
Yasul Romino Honfa
(Typed or printed name of person signing)
meiclint.
(Title of person signing)