Note: Please print this page and use it as a cover sheet. Type the fax audit number (shown below) on the top and bottom of all pages of the document.

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Note: DO NOT hit the REFRESH/RELOAD button on your browser from this page.

Doing so will generate another cover sheet.

To:

Division of Corporations

Fax Number

: (850)617-6380

From:

Account Name : LAMADRID FINANCIAL SERVICES CORP

Account Number : I20200000059
Phone : (954)727-9771

Fax Number : (954)727-9773

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

Email Address: diama lamodad (manual com

### COR AMND/RESTATE/CORRECT OR O/D RESIGN DISTRIBUIDORA TOP TEN 18 CORP

Certificate of Status	0
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KAR (S turb

# (FAX TRANSMISSION) To: 18506176380 From: 19547279773 Pages: 6

### **COVER LETTER**

TO: Amendment Section Division of Corporations

NAME OF CORPO	RATION: DISTRIBUIDORA	TOP TEN 18	CORP	
DOCUMENT NUMI	PO1000003401			
The enclosed Articles	of Amendment and fee are su	ibmitted for fili	ng. ·	
Please return all corre	spondence concerning this ma	itter to the follo	wing:	
	SHIMON BERMAN			
		Name of Co	ntact Person	1
	DISTRIBUIDORA TOP TEN	N 18 CORP		
		Firm/ C	Company	
	20900 NE 30 AVENUE		• • •	
		Add	iress	
	AVENTURA, FL 33180			
	<del></del>	City/ State a	ınd Zip Code	:
	tonimro@hotmail.com			
	E-mail address: (to be us	sed for future a	nnual report	notification)
For further information	n concerning this matter, plea		754	368-1737
Name	of Contact Person	<del></del> \		de & Daytime Telephone Number
Enclosed is a check fo	r the following amount made	payable to the	Florida Depa	utment of State:
S35 Filing Fee	☐\$43.75 Filing Fee & Certificate of Status	S43.75 Fi Certified ( (Additional enclosed)	Сору	☐\$52.50 Filing Fee Certificate of Status Certified Copy (Additional Copy is enclosed)
Amo Divi P.O.	ling Address endment Section ision of Corporations Box 6327		Amend Divisio The Co	Address ment Section n of Corporations entre of Tallahassee
Tall	ahassee, FL 32314		2415 N	J. Monroe Street, Suite 810

H210000896513

Tallahassee, FL 32303

## (FAX TRANSMISSION) 70: 18506176388 70:01:1954 1279773 Pages: 6

#### Articles of Amendment to Articles of Incorporation of

Artic

DISTRIBUIDORA TOP TEN 18 CORP					
(Name of C	Corporation as currently	filed with the Florida	Dept. of State)	_	
P21000002401		·			
	(Document Number of C	Corporation (if known)			
Pursuant to the provisions of section 607.10 its Articles of Incorporation:	06, Florida Statutes, this Fl	orida Profit Corporatio	on adopts the following	ng amer	ndment(s) t
A. If amending name, enter the new nam	e of the corporation:				
		, ,,		_The	
name must be distinguishable and contain th "Inc.," or Co.," or the designation "Cor, "chartered," "professional association," or	p," "Inc," or "Co". A	mpany," or "incorporation or ofessional corporation of the corporation	led" or the abbreviati In name must conta	on "Co in the	rp.," word
B. Enter new principal office address, if a		N/A			_ <del>_</del>
(Principal office address <u>MUST BE A STR</u>	EET ADDRESS )				
			<del></del>	- <u></u>	
C. Enter new mailing address, if applica (Mailing address MAY BE A POST OF		N/A		17	•
(multing mutress MAT BE AT QST V)	FICE BOX		· ·	ن :	
		<del></del>	145) 1165		
D. If amending the registered agent and/	or registered office addre	ss in Florida, enter the		1: 2	
new registered agent and/or the new r			L -1	-	
Name of New Registered Agent	//A		<u> </u>	_	
-	(Florida stree	address)		_	
New Registered Office Address:			Florida		
	(0	ity)	(Zip	Code)	_
		•			
New Registered Agent's Signature, if char hereby accept the appointment as registere		h and accept the obliga	ttions of the position.		
	61		<del> </del>	_	
	Signature of New Reg	istered Agent, if changi	ng		
Check if applicable		-			

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

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## (FAX TRAN**E 112 SCOTO TO 650** 176-280 From: 19547279773 Pages: 6

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)

Example:

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.

X Change	PT Jo	ohn Doe	
X Remove	<u>v</u> <u>M</u>	like Jones	
X Add	<u>SV</u> <u>S</u> a	ally Smith	
Type of Action (Check One)	Title	Name	Address
1) Change	<u>P</u>	ANTONIO MARIA RODRIGUEZ	15970 W SR 84 SUITE 214
Add		•	SUNRISE, FL 33326
Х			
2) Change			
Add			
Remove 3) Change		<u></u>	
Add			
Remove			
4) Change			
Add			
Remove		•	
5) Change			
Add			
Remove			
6) Change			
Add		·	
Remove			

# (FAX TRANSMISSION TO 18506176380 From: 19547279773 Pages: 6

If an amendment provides for an exchange, rechasification, or cancellation of issued shares, provisions for implementing the amendment if not contained in the amendment itself:  (if not applicable, indicate N/A)	(Attach additional sheets, if necess	rry). (Be specific)		
If an amendment provides for an exchange, reclassification, or cancellation of issued shares, provisions for implementing the amendment if not contained in the amendment itself:  (if not applicable, indicate N/A)  A	/A			
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(if not applicable, indicate N/A)	provisions for implementing the	amendment if not con	tained in the amendment	t itself:
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(FAX TRANSMISSION) To: 18406 PROSECTION 195978787878 Pages: 6 The date of each amendment(s) adoption: , if other than the date this document was signed. 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 date will not be listed as the document's effective date on the Department of State's records. (CHECK ONE) Adoption of Amendment(s) ■ 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 03/04/2021 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)

**SHIMON BERMAN** 

(Typed or printed name of person signing)

PRESIDENT

Signature

(Title of person signing)

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