P2100000 6923

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COVER LETTER

TO: Amendment Section Division of Corporations NAME OF CORPORATION: P21000006923 DOCUMENT NUMBER: The enclosed Articles of Amendment and fee are submitted for filing. Please return all correspondence concerning this matter to the following: MARIO E. JUAREZ Name of Contact Person MB FINANCIAL GROUP PA Firm/ Company 7370 COLLEGE PARKWAY SUITE 301 Address FORT MYERS, FL 33907 City/ State and Zip Code MARIO@MBACCOIUNTINGPA.COM E-mail address: (to be used for future annual report notification) For further information concerning this matter, please call: MARIO E. JUAREZ at (239) 938-0065 Area Code & Daytime Telephone Number Name of Contact Person Enclosed is a check for the following amount made payable to the Florida Department of State: S35 Filing Fee ☐\$43.75 Filing Fee & S43.75 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 Division of Corporations P.O. Box 6327 The Centre of Tallahassee

Tallahassee, Fl. 32314

2415 N. Monroe Street, Suite 810

Tallahassee, FL 32303

Articles of Amendment Articles of Incorporation

MELIC CORP

(Name of Corporation as currently filed with the Florida Dept. of State)

P21000006923

(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

A. If amending name, enter the new name of the corpo	.vation.	•
	oracion:	1
N/A		The n
ame must be distinguishable and contain the word "corpo Inc.," or Co.," or the designation "Corp," "Inc," or chartered," "professional association," or the abbrevia	r "Co". A professional corporation	
	N/A	
. <u>Enter new principal office address, if applicable:</u> Principal office address <u>MUST BE A STREET ADDRE</u>	<u></u>	
. Enter new mailing address, if applicable:		i .
(Mailing address MAY BE A POST OFFICE BOX)	.N/A	<u> </u>
		
new registered agent and/or the new registered office N/A Name of New Registered Agent		
	(Florida street address)	
	(Florida street address)	· · ·
New Registered Office Address:		, Florida
New Registered Office Address:	(Florida street address) (City)	, Florida
New Registered Office Address:		
lew Registered Agent's Signature, if changing Registe	(City)	(Zip Code)
iew Registered Agent's Signature, if changing Registe	(City)	(Zip Code)
iew Registered Agent's Signature, if changing Registe	(City)	(Zip Code)
lew Registered Agent's Signature, if changing Registe hereby accept the appointment as registered agent. I a	(City) e <mark>red Agent:</mark> m familiar with and accept the obligat	(Zip Code) ions of the position.
iew Registered Agent's Signature, if changing Registe hereby accept the appointment as registered agent. I a	(City)	(Zip Code) ions of the position.
New Registered Agent's Signature, if changing Registe hereby accept the appointment as registered agent. I at	(City) e <mark>red Agent:</mark> m familiar with and accept the obligat	(Zip Code) ions of the position.

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 Doc 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 Doe	
X Remove	<u>V</u>	Mike Jones	1
X Add	<u>\$V</u>	Sally Smith) :
Type of Action (Check One)	<u>Title</u>	Name	<u>Addres</u> s
1) Change	CEOP	CAMILO ALFREDO LICARDIE AI	3324 10TH ST. W.
Add			LEHIGH ACRES, FL 33971
Remove 2) Change	CEOP	SANDY GABRIELA LICARDIE	3324 10TH ST ₁ W.
Add			LEHIGH ACRES, FL 33971
Remove 3) Change	SEC	CAMILO ALFREDO LICARDIE	3324 10TH ST W. LEHIGH ACRES, FL 33971
X Add			
Remove 4) Change	SEC	SANDY GABRIELA LICARDIE	3324 10TH ST. W.
Add		-	LEHIGH ACRES, FL 33971
X Remove			
5) Change Add			
Remove			
6) Change		_	
Add			
Remove			

(Attach additional sheets, if necessary). (Be specific) AMENDED ARTICLE VII	
REMOVED CEOP CAMILO ALFREDO LICARDIE ARMAS AND ADDED SANDY GABRIELA	LICARDIE CHIROY
REMOVED SECRETARY SANDY GABRIELA LICARDIE CHIROY AND ADDED AS SECRETA	ARÝ
CAMILO ALFREDO LICARDIE ARMAS.	<u>;</u> <u>;</u>
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	t .
F. 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)	1
THE RECLASIFICATION OF ISSUED STOCKS ARE AS FOLLOW:	<u>1</u>
SANDY GABRIELA LICARDIE CHIROY HOLDS 45% OR 85 SHARES OF THE TOTAL 200 IS	SUED.
LESVIN ROXAN MEDRANO JIMENEZ HOLDS 35% OR 75 SHARES OF THE TOTAL 200 ISSU	JED
CAMILO ALFREDO LICARDIE ARMAS HOLDS 20% OR 40 SHARES OF THE TOTAL 200 ISS	UED
	'
	i -
	;
) }

E. If amending or adding additional Articles, enter change(s) here:

	FEBRUARY 181H 2021	
The date of each amendment		, if other than the
date this document was signed		
Effective date <u>if applicable</u> :	WHEN PROCESSED BY THE STATE OF FLORIDA DIV. OF CORP	ORATIONS
enective date <u>it applicable</u> .	(no more than 90 days after amendment file date)	:
		1
	this block does not meet the applicable statutory filing requirements, thi he Department of State's records.	s date will not be listed as the
Adoption of Amendment(s)	(<u>CHECK ONE</u>)	
The amendment(s) was/wer action was not required.	re adopted by the incorporators, or board of directors without shareholder	action and shareholder
☐ The amendment(s) was/we by the shareholders was/w	re adopted by the shareholders. The number of votes cast for the amendmere sufficient for approval.	ent(s)
	re approved by the shareholders through voting groups. The following stand for each voting group entitled to vote separately on the amendment(s):	tement
"The number of votes	cast for the amendment(s) was/were sufficient for approval	•
by		•
,	(voting group)	•
Į:	EBRUARY 18TH 2021	
Dated		
	- Li-	•
Signature		_ _
EB CERTIFICATION OF THE PERSON	y a director president or other officer - if directors or officers have not be	ccņ
	steeted, by an incorporator - if in the hands of a receiver, trustee, or other	court
ar	ppointed fiduciary by that fiduciary)	•
	SANDY GABRIELA LICARDIE CHIROY	I
	(Typed or printed name of person signing)	
	INCOMING CEOP	
	(Title of person signing)	-