# 721000008243

(Requestor's Name)
(Address)
(Address)
(City/State/Zip/Phone #)
(City/State/Zip/F110fle #)
PICK-UP WAIT MAIL
(Business Entity Name)
<b>(</b> = - , , , , , , , , , , , , , , , , , ,
(Document Number)
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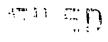
A. BUTLER
DEC 3 2021

## **COVER LETTER**

**TO:** Amendment Section Division of Corporations

NAME OF CORPORA	PRO ZERIMAR C ATION:	ORP		
	P21000008243	<u> </u>		
DOCUMENT NUMBI	ZR:			
The enclosed Articles of	Amendment and fee are su	bmitted for filing.		
Please return all corresp	ondence concerning this ma	tter to the following:		
,	VERONICA RAMIREZ			
	Name of Contact Person PRO ZERIMAR CORP			
	107 2ND STREET WEST	Firm/ Company		
 I.	EHIGH ACRES, FL 33971	Address		
_		City/ State and Zip Code	2	
1	AXHISPANO@GMAIL.CO	ОМ		
_	E-mail address: (to be us	sed for future annual report	notification)	
For further information	concerning this matter, pleas	se call:		
ASTRID ANGOLA		239 at (	2485177	
Name of	Contact Person		de & Daytime Telephone Number	
Enclosed is a check for t	he following amount made	payable to the Florida Depa	artment of State:	
☑ \$35 Filing Fee	☐\$43.75 Filing Fee & Certificate of Status	S43.75 Filing Fee & Certified Copy (Additional copy is enclosed)	□\$52.50 Filing Fee Certificate of Status Certified Copy (Additional Copy is enclosed)	
Mailing Address 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 to Articles of Incorporation of



PRO ZERIMAR CORP

2021 NOV 15 AH 7:46

(Name of Corporation as current	ly filed with the Florida Dept. of State)
P21000008243	· · · · · · · · · · · · · · · · · · ·
(Document Number o	f Corporation (if known)
Pursuant to the provisions of section 607.1006, Florida Statutes, this its Articles of Incorporation:	Florida Profit Corporation adopts the following amendment(s) t
A. If amending name, enter the new name of the corporation: N/A	The new
name must he distinguishable and contain the word "corporation," " "Inc.," or Co.," or the designation "Corp," "Inc," or "Co". , "chartered." "professional association," or the abbreviation "P.A.	company," or "incorporated" or the abbreviation "Corp"  A professional corporation name must contain the word
	N/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)	N/A
maning data same same same same same same same sam	
D. If amending the registered agent and/or registered office add new registered agent and/or the new registered office address	
N/A	<u>-</u>
Name of New Registered Agent	<del></del>
- CELL MAN	
(Plorida str	reet address)
New Registered Office Address:	, Florida
	(City) (Zip Code)
New Registered Agent's Signature, if changing Registered Agent	
hereby accept the appointment as registered agent. I am familiar s	with and accept the obligations of the position.
Signature of New R	egistered Agent, if changing
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)

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 <u>PT</u> John Doc X Remove $\underline{\mathbf{v}}$ Mike Jones <u>X</u> Add <u>SV</u> Sally Smith Type of Action Title Name 1 Address (Check One) **GUILLERMO RAMIREZ** 5107 2ND STREET WEST 1) Change LEHIGH ACRES, FL 33971 \_\_ Add \_\_ Remove 2) \_\_\_\_ Change \_\_\_\_ Add \_\_ Remove 3) \_\_\_\_ Change \_\_\_\_ Add \_\_ Remove 4) \_\_\_\_ Change \_\_\_\_ Add \_ Remove 5) \_\_\_\_ Change Add Remove 6) \_\_\_\_ Change \_\_\_ Add \_\_\_\_ Remove

L. II amending o	r adding additional	Articles, enter chai	nge(s) here:			
- (Attach <i>additio</i> : √A	nal sheets, if necessar	y). (Be specific)				
N/A						
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If an amendm	ent provides for an o	vehance roclassifi	ication or cance	Hatian of issued (	shares	
provisions fo	r implementing the a	mendment if not o	contained in the	amendment itsel	f:	
(if not ap	nlicable, indicate N/A	)			<u>.</u>	
/A						
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174.11						
						·

08/23/2021

1012 2000

The date of each amendment(s) ac date this document was signed.	option:	, if other than the
Effective date <u>if applicable</u> :	8   23   2   (no more than 90 days after amendment for	ile date)
Note: If the date inserted in this b document's effective date on the De	ock does not meet the applicable statutory filing requ partment of State's records.	airements, this date will not be listed as the
Adoption of Amendment(s)	(CHECK ONE)	
■ The amendment(s) was/were add action was not required.	pted by the incorporators, or board of directors without	shareholder action and shareholder
☐ The amendment(s) was/were add by the shareholders was/were su	pted by the shareholders. The number of votes cast for fficient for approval.	r the amendment(s)
	roved by the shareholders through voting groups. The each voting group entitled to vote separately on the am	
"The number of votes cast	for the amendment(s) was/were sufficient for approval	•
by	(voting group)	
	(voling group)	
08/23/2021		
DatedSignature	Michael	
	rector president or other officer - if directors or office	
	<ul> <li>I, by an incorporator – if in the hands of a receiver, trused fiduciary by that fiduciary)</li> </ul>	stee, or other court
wppo	RAMIREZ, VERONICA	
	(Typed or printed name of person signing) VICEPRESIDENT	
	(Title of person signing)	<del></del>



363, .... 12 - 44 15: 52

### FLORIDA DEPARTMENT OF STATE Division of Corporations

October 15, 2021

VERONICA RAMIREZ PRO ZERIMAR CORP 5107 2ND STREET WEST LEHIGH ACRES, FL 33971 US

SUBJECT: PRO ZERIMAR CORP Ref. Number: P21000008243

We have received your document for PRO ZERIMAR CORP and your check(s) totaling \$. However, the enclosed document has not been filed and is being returned for the following correction(s):

The date of adoption of each amendment must be included in the document.

If the corporation is a **PROFIT** corporation it must be signed 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.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6050.

Letter Number: 621A00025183

Anissa Butler Regulatory Specialist II

www.sunbiz.org