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I ALBRITTON

CAPITAL CONNECTION, INC.

417 E. Virginia Street, Suite 1 • Tallahassee, Florida 32301 (850) 224-8870 • 1-800-342-8062 • Fax (850) 222-1222

				
IGMA INTERNATION	ONAL CORP		ļ	
			1	
				
				
				
	 .			Art of Inc. File
				LTD Partnership File
			<u> </u>	Foreign Corp. File
			 -	L.C. File
				Fictitious Name File
				Trade/Service Mark
				Merger File
				Art. of Amend. File
				RA Resignation
				Dissolution / Withdrawal
				Annual Report / Reinstatement
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				Certificate of Status
				Certificate of Fictitious Name
				Corp Record Search
				Officer Search
				Fictitious Search
Signature		·		Fictitious Owner Search
				Vehicle Search
	_ 			Driving Record
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September 20, 2021

CAPITAL CONNECTION, INC.

SUBJECT: IGMA INTERNATIONAL CORP

Ref. Number: P21000022540

We have received your document for IGMA INTERNATIONAL CORP and your check(s) totaling \$25.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

The fee to file your document is \$35.

There is a balance due of \$10.00.

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.

Irene Albritton Regulatory Specialist III

Letter Number: 921A00022652



COVER LETTER

TO: Amendment Section
Division of Corporations

NAME OF CORPO	RATION: IGMA INTERNAT	TIONAL CORP	
DOCUMENT NUMI			
	of Amendment and fee are su	ibmitted for filing.	- · · · · · · · · · · · · · · · · · · ·
Please return all corre	spondence concerning this ma	itter to the following:	
	JONATHAN HAGHDOUST		
		Name of Contact Person	1
		Firm/ Company	
	1395 Brickell Av. Suite 800		
	Minmi El 22121	Address	
	Miami, FL 33131	City/ State and Zin Co. 1	
		City/ State and Zip Code	2
	jonathanh@hotmail.com		
	E-mail address: (to be us	sed for future annual report	notification)
For further information	n concerning this matter, pleas	se cali:	
		at (_)
Name o	of Contact Person	Area Co)de & Daytime Telephone Number
Enclosed is a check fo	r the following amount made	payable to the Florida Depa	artment of State:
S35 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		Amend Divisio The Co	Address ment Section n of Corporations entre of Tallahassee N. Monroe Street, Suite 810

Tallahassee, FL 32303

Articles of Amendment to Articles of Incorporation of

of Corporation as current	ly filed with the Florida Dept. of State)	100 SEP
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	• •	
1006, Florida Statutes, this	Florida Profit Corporation adopts the following	amendh
ame of the corporation:		,
Corp," "Inc," or "Co".	A professional corporation name must contain	The ne 1 "Corp., the wor
if applicable: TREET ADDRESS	16901 Collins Av. Suite 3705. Sunny Isles, F	L 33160
icable: OFFICE BOX)	16901 Collins Av. Suite 3705. Sunny Isles, F	L 33160
nd/or registered office add	lress in Florida, enter the name of the	
INES GOMEZ	<u></u>	
16901 Collins Av. Suite 3	705.	
1Florida si	reet address)	
Sunny Isles	Florida 33160	
	(City) , Florida (Zip Ci	ode)
hanging Degistered Agen	(
<u>nanging Registered Agen</u> Iered agent. I am familiar	with and accept the obligations of the position.	
Signature of New 1	Registered Agent, if changing	
	(Document Number of 1006, Florida Statutes, this name of the corporation: The word "corporation," or "Co". Tor the abbreviation "P.A. If applicable: TREET ADDRESS) Icable: OFFICE BOX) INES GOMEZ 16901 Collins Av. Suite 3 (Florida sa Sunny Isles)	(Document Number of Corporation (if known) 1006, Florida Statutes, this Florida Profit Corporation adopts the following time of the corporation: 10the word "corporation," "company," or "incorporated" or the abbreviation forp, "Inc," or "Co". A professional corporation name must contain or the abbreviation "P.A." 16901 Collins Av. Suite 3705. Sunny Isles, F. 16901 Collins Av. Suite 3705. 16901 Collins Av. Suite 3705. 16901 Collins Av. Suite 3705.

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	PT	John Doe	
X Remove	<u>v</u>	Mike Jones	
_X Add	<u>sv</u>	<u>Sally Smith</u>	
Type of Action (Check One)	<u>Title</u>	Name	<u>Addres</u> s
1) Change	D	JONATHAN HAGHDOUST	1395 Brickell Av. SUITE 800
Add			MIAMI, FL 33131
X Remove			
2) Change	D	INES GOMEZ	16901 Collins Av. Suite 3705.
X Add			Sunny Isles, FL 33160
Remove 3) Change			
Add			<u> </u>
Remove			
4) Change			
Add			
Remove			
5) Change		_	
Add			
Remove			
6) Change			
Add			
Remove			

E. <u>II</u>	famending or adding additional Articles, enter change(s) here:	
(7	Attach additional sheets, if necessary). (Be specific)	
F. <u>I</u> I	an amendment provides for an exchange, reclassification, or cancellation of issued shares,	
1	orovisions for implementing the amendment if not contained in the amendment itself: (if not applicable, indicate N/A)	
	(y not appreciose, maictie wix)	
-		
_		

The date of each amendment(s) acd date this document was signed.	ioption:		, if other than the
Effective date if applicable:			
	(no more the	an 90 days after amendment file date)	
Note: If the date inserted in this book document's effective date on the De	lock does not meet the appartment of State's record	applicable statutory filing requirements, this date will ds.	I not be listed as the
Adoption of Amendment(s)	(CHECK ONE)		
■ The amendment(s) was/were ado action was not required.	pted by the incorporators.	, or board of directors without shareholder action and	shareholder
☐ The amendment(s) was/were ado by the shareholders was/were su	pted by the shareholders. fficient for approval,	The number of votes cast for the amendment(s)	
☐ The amendment(s) was/were app must be separately provided for	roved by the shareholders each voting group entitled	s through voting groups. The following statement d to vote separately on the amendment(s):	
		s/were sufficient for approval	
by		,	
	(voting group)	$\overline{}$	
SEP 14 - 20 Dated			
Signature			
selected	rector, president or other on I, by an incorporator — if it is fiduciary by that fiducit	officer – if thectors of officers have not been in the hands of a receiver, trustee, or other court iary)	_
1	INES GOMEZ	V	
-	(Typed or print	nted name of person signing)	
I	DIRECTOR		
-	(Title of persor	n signing)	