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COVER LETTER

TO: Amendment Section Division of Corporations

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The enclosed Articles of Amendment and fee are submitted for filing. Please return all correspondence concerning this matter to the following: CADIE ROOMGEZ Name of Contact Person	NAME OF CORPORATION: _ EDDIE	PLEDRIGUEZ P.A.
Please return all correspondence concerning this matter to the following: Color Pagard & Z Name of Contact Person	DOCUMENT NUMBER: P2100	00023836
Name of Contact Person EDDIE Roon 6 22 P.A. Firm/ Company 15817 Sw 138 Ten Address Mam, FL, 33196 City/ State and Zip Code E-mail address: (to be used for future annual report notification) For further information concerning this matter, please call: Contact Person	The enclosed Articles of Amendment and fee ar	re submitted for filing.
Firm/ Company 15817 Sw 138 Tex Address Address City/ State and Zip Code E-mail address: (to be used for future annual report notification) For further information concerning this matter, please call: Choir Promocor at (786) 427 - 5868 Name of Contact Person Area Code & Daytime Telephone Number Enclosed is a check for the following amount made payable to the Florida Department of State: S35 Filing Fee Status Certified Copy (Additional copy is enclosed) (Additional Copy	Please return all correspondence concerning this	s matter to the following:
Firm/ Company 15817 Sw 138 Tex Address MAM, FL, 33146 City/ State and Zip Code E-mail address: (to be used for future annual report notification) For further information concerning this matter, please call: Looie Roomage at (786) 427 - 5868 Name of Contact Person Area Code & Daytime Telephone Number Enclosed is a check for the following amount made payable to the Florida Department of State: S35 Filing Fee \$43.75 Filing Fee &	۷,	anic B
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Mailing Address Amendment Section Amendment Section		
Division of Corporations 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 of		
FOUE TO	ODRIGUEZ P.A.		
	ration as currently filed with	the Florida Dept. of State)	
P2.1000	023836		
(D	ocument Number of Corporatio	n (if known)	
Pursuant to the provisions of section 607.1006, F its Articles of Incorporation:	orida Statutes, this <i>Florida Pro</i>	fit Corporation adopts the fo	ollowing amendment(s)
A. If amending name, enter the new name of t	he corporation:		
~	<u> </u>	- <u>-</u> -,	The new
name must be distinguishable and contain the wor "Inc.," or Co.," or the designation "Corp," ' "chartered," "professional association," or the d	Inc," or "Co". A profession	or "incorporated" or the abb al corporation name must	reviation "Corp.," contain the word
B. Enter new principal office address, if appli			
(Principal office address <u>MUST BE A STREET</u>	<u> </u>		1017
			30 MIII: 25
			<u>ن</u>
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE)	E ROY)		ون ب
(Maining address MAT BE A TOST OF FTC)	<u></u>		
		·	
			·
D. If amending the registered agent and/or renew registered agent and/or the new regist		ida, enter the name of the	
	The office water 1991		
Name of New Registered Agent			
	(Florida street address)		
New Registered Office Address:		, Florida	
	(City)		(Zip Code)
Now Designated Amen No. 67 4 15 1	Thurstade and A		
New Registered Agent's Signature, if changing I hereby accept the appointment as registered ago	Registered Agent: nt. I am familiar with and acc	ept the obligations of the no-	sition.

Signature of New Registered Agent, if changing

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 Doe	
X Remove	<u>V</u>	Mike Jones	
X Add	÷ <u>sv</u>	Sally Smith	
Type of Action (Check One)	<u>Title</u>	<u>Name</u>	<u>Addres</u> s
1) Change Add Remove		SUNEY LASTRA	963 SW 154 PATH MIGMI, PC 33194
2) Change Add			
Remove 3) Change			
Add Remove			
4) Change Add			
Remove 5) Change Add			
Remove 6) Change		_	
Add			

tach additional sheets, if necessary).	(Be specific)			
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an amendment provides for an exc rovisions for implementing the am	endment if not con	ton, or cancellati	on of issued share: ndment itself:	호 한
(if not applicable, indicate N/A)	themene in not con	tained in the aine	nament itsen.	
				
				
				- .

The date of each amendment(s) a date this document was signed.	doption:	, if other than the
Effective date if applicable:		
meetite date it applicable.	(no more than 90 days after amendment file date	·/
Note: If the date inserted in this bedocument's effective date on the De	lock does not meet the applicable statutory filing requirement partment of State's records.	nts, this date will not be listed as the
Adoption of Amendment(s)	(<u>CHECK ONE</u>)	
The amendment(s) was/were add action was not required.	opted by the incorporators, or board of directors without shareh	nolder action and shareholder
☐ The amendment(s) was/were add by the shareholders was/were su	opted by the shareholders. The number of votes cast for the an officient for approval.	nendment(s)
☐ The amendment(s) was/were app must be separately provided for	proved by the shareholders through voting groups. The followi each voting group entitled to vote separately on the amendme	ng statement nt(s):
"The number of votes cast	for the amendment(s) was/were sufficient for approval	
by	.,	
,	(voting group)	
Dated		
Signature	all Paga	
(By a di selecter	rector, president or other officer – if directors or officers have I, by an incorporator – if in the hands of a receiver, trustee, or	not been other court
appoint	ed fiduciary by that fiduciary)	
	EDDIE PLODIE EZ	
	(Typed or printed name of person signing)	
	P	
	(Title of person signing)	

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