## P21000024450

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09/15/21--01008--028 \*\*35.00



A. Butler

## COVER LETTER

TO: Amendment Section Division of Corporations

NAME OF CORPORATION: AS CAPSTAL OSA COZP DOCUMENT NUMBER: PZ1000024450

The enclosed Articles of Amendment and fee are submitted for filing.

Please return all correspondence concerning this matter to the following:



For further information concerning this matter, please call:

EDER A. ÁRRESETA UNTRIED at ( 786, 318-6190 Nonset Control Person Area Code & Daytime Telephone Number

Enclosed is a check for the following amount made payable to the Florida Department of State:

X 835 Filing Fee

□\$43.75 Filing Fee & Certificate of Status

□ \$43.75 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

Street Address Amendment Section Division of Corporations The Centre of Tallahassee

:		
	Articles of Amendment	
А	to articles of Incorporation	
	of	<b>7</b> i A
		A company
(Name of Corporatio	n as currently filed with t	the Florida Dept. of State)
		2021 SEP T5 PH 4:05
(Docume	ent Number of Corporation	(if known) SECTED OF STATE
Pursuant to the provisions of section 607.1006, Florida its Articles of Incorporation:	Statutes, this <i>Florida Profi</i>	it Corporation adopts the following amendment(s) to
A. If amending name, enter the new name of the cor	poration:	
	······································	The new
name must be distinguishable and contain the word "con "lne.," or Co.," or the designation "Corp," "Inc." "chartered." "professional association," or the abbrev	or "Co". A professiona	"incorporated" or the abbreviation "Corp.," il corporation name must contain the word
B. Enter new principal office address, if applicable:		
(Principal office address <u>MUST BE A STREET ADDI</u>		
C. Park and the state of the state		
C. <u>Enter new mailing address, if applicable:</u> (Mailing address <u>MAY BE A POST OFFICE BOX</u>	-	
<u></u>	·	
D. If amending the registered agent and/or registere	d office address in Florid	la, enter the name of the
new registered agent and/or the new registered o	<u>ilice address:</u>	
Name of New Registered Agent		
	(Florida street address)	
New Revisioned Office Address		
<u>New Registered Office Address</u> :	(City)	, Horida (Zip Code)
		,
New Registered Agent's Signature, if changing Regis	stered Agent:	

,

*Thereby accept the appointment as registered agent.* I am familiar with and accept the obligations 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 Doe is listed as the PST and Mike Jones is listed as the F. There is a change, Mike Jones leaves the corporation, Sally Smith is named the F and S. These should be noted as John Doe, PT as a Change, Mike Jones, F as Remove, and Sally Smith, SF as an Add.

## Example:

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<u>X</u> Change	<u>PT</u>	John Doe	
X Remove	$\underline{V}$	Mike Jones	
<u>_X</u> Add	<u>SV</u>	Sally Smith	
<u>Type of Action</u> (Check One)	Title	Name	Address
1) Change	VP	EDER 7. ARRJETS PEREZ	
_ <b>X_</b> Add			Minter Puil FL 32742
Remove 2) Change	51	JANSER A. ATRIETA UNATIO	1155 Wildwoodow ZUH
_X_Add			Winle, PEIK, FL 32792
Remove			
Add			
Remove		-	
4) Change			
Add			
Remove		-	
57 Change			
Add			
Remove		-	
6) Change			
Add			····
Remove		-	

	<mark>ling additional Arti</mark> heets, if necessary).	(Be specific)	<u> </u>		
		in greener			
				<del>_</del> • _	
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				· · · · ·	
If an amendment p	provides for an exch	ange, reclassifica	tion, or cancellatio	on of issued shares	_
provisions for imp	plementing the ame	ndment if not cor	ntained in the ame	ndment itself:	-
	ble, indicate N/A)				
		<u> </u>			
<u>.</u>					
<u> </u>					

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.

Adoption of Amendment(s) (CHECK ONE)

- 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

bv \_\_\_\_ (voting group) 09.01.2021 Dated Edm Signature (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) EDER A. ANZJETA UNFRIED (Typed or printed name of person signing) PRESIDENT (Tide of person signing)