P91000092299

(Requestor's Name)
(Address)
(Address)
(Address)
(City/State/Zip/Phone #)
PICK-UP WAIT MAIL
(Business Entity Name)
(Dusiness Linky Name)
(Document Number)
Certified Copies Certificates of Status
Special Instructions to Filing Officer:
<u> </u>





200362893022

03/30/21--01021--007 **35.00

21 MAR 30 AM 7: 38



COVER LETTER 🗼

TO: Amendment Section Division of Corporations

NAME OF CORPOR	RATION: MOMEMIAMI CO)RP			
DOCUMENT NUMI	BER: P21000025522				
The enclosed Articles	of Amendment and fee are sul	bmitted for filing.			
Please return all corre	spondence concerning this ma	tter to the following:			
	MONTSE COSTELLO				
	Name of Contact Person				
	MOMEMIAMI CORP				
		Firm/ Company			
	9301 SW 82ND AVE				
	Address				
	MIAMI, FL 33156				
		City/ State and Zip Code	:		
	montsecostello@gmail.com				
	E-mail address: (to be us	ed for future annual report	notification)		
For further informatio	n concerning this matter, pleas		3639457		
	of Contact Person	at (917) 3639457 de & Daytime Telephone Number		
name :	of Contact Person	Area Coc	de & Daytime Telephone Number		
Enclosed is a check for	or the following amount made	payable to the Florida Depa	irtment of State:		
S35 Filing Fee	S43.75 Filing Fee & Certificate of Status	\$43.75 Filing Fee & Certified Copy (Additional copy is enclosed)	S52.50 Filing Fee Certificate of Status Certified Copy (Additional Copy is enclosed)		
Am Div P.O	iling Address endment Section ision of Corporations . Box 6327 ahassee, FL 32314	Amend Divisio The Co 2415 N	Address ment Section n of Corporations entre of Tallahassee N. Monroe Street, Suite 810		

Articles of Amendment to Articles of Incorporation of

MOMEMIAMI CORP	
(Name of Corporation as currently	filed with the Florida Dept. of State)
P21000025522	
(Document Number of	Corporation (if known)
Pursuant to the provisions of section 607.1006, Florida Statutes, this <i>I</i> its Articles of Incorporation:	Florida Profit Corporation adopts the following amendment(s) to
A. If amending name, enter the new name of the corporation:	
MONTSERRAT VIADER COSTELLO PA	The new
name must be distinguishable and contain the word "corporation," "c "Inc.," or Co.," or the designation "Corp," "Inc," or "Co". A "chartered," "professional association," or the abbreviation "P.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)	
	21
D. If amending the registered agent and/or registered office addr new registered agent and/or the new registered office address:	ess in Florida, enter the name of the
Name of New Registered Agent	
(Florida stre	
New Registered Office Address:	(City) (Zip Code)
New Registered Agent's Signature, if changing Registered Agent: I hereby accept the appointment as registered agent. I am familiar w	ith and accept the obligations of the position.

Signature of New Registered 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)

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	\underline{V}	Mike Jones		
X Add	<u>sv</u>	Sally Smith		
Type of Action (Check One)	Title	Name		<u>Addres</u> s
1) Change		<u> </u>	·	
Add				
Remove				
2) Change				
Add				
Remove 3) Change				
Add				
Remove				
4) Change				
Add				
Remove				
5) Change				
Add				
Remove				
6) Change				
Add				
Remove				

Attach additional sheets, if necessary).	ticles, enter char . (Be specific)	 ;			
			·		
				· · · · · · · · · · · · · · · · · · ·	
					
· · · · · · · · · · · · · · · · · · ·					
		<u> </u>		·	
		-			_
				<u> </u>	
			·	<u></u>	
			<u>-</u>	·-·	
··· <u></u>					
f an amendment provides for an exc provisions for implementing the am	<u>:hange, reclassifi</u> endment if not c	cation, or cancell ontained in the a	<u>ation of issued sh</u> mendment itself:	ares,	
(if not applicable, indicate N/A)					
					
					
		7			

	3/26/2021	
The date of each amendment(s) ado	option:	, 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 blo document's effective date on the Dep	ock does not meet the applicable statutory filing requirements, this date wartment of State's records.	vill not be listed as the
Adoption of Amendment(s)	(CHECK ONE)	
The amendment(s) was/were adop action was not required.	sted by the incorporators, or board of directors without shareholder action a	nd shareholder
☐ The amendment(s) was/were adop by the shareholders was/were suff	sted by the shareholders. The number of votes cast for the amendment(s) ficient for approval.	
	oved by the shareholders through voting groups. The following statement ach voting group entitled to vote separately on the amendment(s):	
"The number of votes cast fo	or the amendment(s) was/were sufficient for approval	
by	·	
	(voting group)	
3/26/2021		
Dated		
	1-2 1/1 1 () 1/1	
Signature	outse Viader Costello	
	ector, president or other officer – if directors or officers have not been by an incorporator – if in the hands of a receiver, trustee, or other court	
	d fiduciary by that fiduciary)	
••	MONTSERRAT VIADER COSTELLO	
-	(Typed or printed name of person signing)	
P	PRESIDENT	
_	(Title of person signing)	