P21000027903

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COVER LETTER

TO: Amendment Section Division of Corporations

CREMA PINC	CREST CORP
P21000027903 DOCUMENT NUMBER:	
The enclosed Articles of Amendment and fee at	re submitted for filing.
Please return all correspondence concerning this	s matter to the following:
EFTHYMIOS PALIOUR	RAS
· · · · · · · · · · · · · · · · · · ·	Name of Contact Person
220 MIRACLE MILE S	Firm/ Company TE 203
CORAL GABLES FL 33	Address 3134
······································	City/ State and Zip Code
PALIOURASM@GMAI	IL.COM
E-mail address: (to l	be used for future annual report notification)
For further information concerning this matter.	please call:
EFTHYMIOS PALIOURAS	786 3253474 at ()
Name of Contact Person	at () Area Code & Daytime Telephone Number
Enclosed is a check for the following amount in	ade payable to the Florida Department of State:
■ \$35 Filing Fee □\$43.75 Filing Fee Certificate of State	
Mailing Address Amendment Section Division of Corporations P.O. Box 6327 Tallahassee, FI, 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

* CREMA PINCREST CORP

(Name of Corporation as currently	filed with the Florida Dept. of State)	
P21000027903		
(Document Number of	Corporation (if known)	
Pursuant to the provisions of section 607.1006, Florida Statutes, this <i>F</i> its Articles of Incorporation:	Torida Profit Corporation adopts the follow	wing amendment(s) to
A. If amending name, enter the new name of the corporation: CREMA PINECREST CORP		The new
name must be distinguishable and contain the word "corporation," "co "Inc.," or Co.," or the designation "Corp," "Inc," or "Co". A "chartered," "professional association," or the abbreviation "P.A."		ation "Corp.,"
B. Enter new principal office address, if applicable: (Principal office address MUST BE A STREET ADDRESS)		<u></u>
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)		<u> </u>
D. If amending the registered agent and/or registered office address: Name of New Registered Agent	ess in Florida, enter the name of the	
tFlorida stre	et address)	
New Registered Office Address:	Florida	
	City) (7	(ip 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	≈ 2021 H
Signature of New Re	gistered Agent, if changing	<u></u>
Check if applicable ☐ The amendment(s) is/are being filed pursuant to s. 607.0120 (11) (c)	e), F.S.	වී. ස

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.

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			
2) Change			
Add			
Remove 3) Change			
Add			
Remove			
4) Change			
Add			
Remove			
5) Change	n		
Add			
Remove			
6) Change			
Add			
Remove			

If amending or adding additional Art (Attach additional sheets, if necessary).	(Be specific)			
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	والمرادية			
	-			
			<u> </u>	
		-1		
			-	
If an amendment provides for an excl	ange, reclassification, or can	cellation of issued share	<u>s,</u>	
provisions for implementing the ame (if not applicable, indicate N/A)	ndment if not <u>contained in t</u> l	ie amendment itself:		
	.			
				
			· -	

INMEDIATELY

The date of each amendment(s) adoption:	, if other than the
date this document was signed. 04/28/2021	
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 v document's effective date on the Department of State's records.	will not be listed as the
Adoption of Amendment(s) (<u>CHECK ONE</u>)	
The amendment(s) was/were adopted by the incorporators, or board of directors without shareholder action a action was not required.	and shareholder
☐ 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 by	2021 11
(voting group)	ယ
04/28/2021 Dated	M 8: 17
(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) EFTHYMIOS PALIOURAS	
(Typed or printed name of person signing) VICEPRESIDENT	
(Title of person signing)	