

Jul 15, 2021 3:51 PM

No. 0170 1

P21000028885

Florida Department of State
Division of Corporations
Electronic Filing Cover Sheet

Note: Please print this page and use it as a cover sheet. Type the fax audit number (shown below) on the top and bottom of all pages of the document.

((H21000272294 3)))



H210002722943ABCS

Note: DO NOT hit the REFRESH/RELOAD button on your browser from this page.
Doing so will generate another cover sheet.

To:
Division of Corporations
Fax Number : (850)617-6380

From:
Account Name : INDEPENDENT TAX SERVICES PLUS CORP.
Account Number : I20020000072
Phone : (305)887-0001
Fax Number : (305)884-6444

****Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please.****

Email Address: FamilyFlashShop@gmail.com

FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS
21 JUL 15 PM 1:54

COR AMND/RESTATE/CORRECT OR O/D RESIGN
FAMILY FLASH SHOP INC

Certificate of Status	0
Certified Copy	0
Page Count	05
Estimated Charge	\$35.00

JUL 16 2021

A. LUNT

RECEIVED

2021 JUL 15 PM 3:20

Electronic Filing Menu

Corporate Filing Menu

Help

Jul 15, 2021 3:51PM

No. 9170 P. 2
H2100002885-43

COVER LETTER

TO: Amendment Section
Division of Corporations

NAME OF CORPORATION: FAMILY FLASH SHOP INC

DOCUMENT NUMBER: P2100002885

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

Please return all correspondence concerning this matter to the following:

NELSA M DIAZ GILART

Name of Contact Person

Firm/ Company

17607 SW 146 AVE

Address

MIAMI FL 33177

City/ State and Zip Code

FAMILYFLASHSHOP@GMAIL.COM

E-mail address: (to be used for future annual report notification)

FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS
21 JUL 15 PM 1:54

For further information concerning this matter, please call:

NELSA M DIAZ GILART

at (786) 608 1515

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:

- | | | | |
|-----------------------------------------------------|------------------------------------------------------------------------|-----------------------------------------------------------------------------------------------------|----------------------------------------------------------------------------------------------------------------------------|
| <input checked="" type="checkbox"/> \$35 Filing Fee | <input type="checkbox"/> \$43.75 Filing Fee &
Certificate of Status | <input type="checkbox"/> \$43.75 Filing Fee &
Certified Copy
(Additional copy is
enclosed) | <input type="checkbox"/> \$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

Street Address

Amendment Section
Division of Corporations
The Centre of Tallahassee
2415 N. Monroe Street, Suite 810
Tallahassee, FL 32303

Jul 15, 2021 3:51PM

No. 0170000P. 3122773

Articles of Amendment
to
Articles of Incorporation
of

FAMILY FLASH SHOP INC

(Name of Corporation as currently filed with the Florida Dept. of State)

P21000028885

(Document Number of Corporation (if known))

Pursuant to the provisions of section 607.1006, Florida Statutes, this *Florida Profit Corporation* adopts the following amendment(s) to its Articles of Incorporation:

A. If amending name, enter the new name of the corporation:

The new name must be distinguishable and contain the word "corporation," "company," or "incorporated" or the abbreviation "Corp.," "Inc.," or "Co.," or the designation "Corp.," "Inc.," or "Co." A professional corporation name must contain the word "chartered," "professional association," or the abbreviation "P.A."

B. Enter new principal office address, if applicable:
(Principal office address MUST BE A STREET ADDRESS)

24966 SW 107 AVE

HOMESTEAD, FL, 33032

C. Enter new mailing address, if applicable:
(Mailing address MAY BE A POST OFFICE BOX)

24966 SW 107 AVE

HOMESTEAD, FL, 33032

D. If amending the registered agent and/or registered office address in Florida, enter the name of the new registered agent and/or the new registered office address:

Name of New Registered Agent

(Florida street address)

New Registered Office Address: _____, Florida _____
(City) (Zip Code)

New Registered Agent's Signature, if changing Registered Agent:

I hereby accept the appointment as registered agent. I am familiar with 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) (c), F.S.

FILED
21 JUL 15 PM 4:54
SECRETARY OF STATE
DIVISION OF CORPORATIONS

Jul. 15. 2021 3:52PM

No. 0170001P. 422943

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 V Mike Jones

X Add SV Sally Smith

Type of Action (Check One)	Title	Name	Address
1) <input type="checkbox"/> Change	_____	_____	_____
<input type="checkbox"/> Add	_____	_____	_____
<input type="checkbox"/> Remove	_____	_____	_____
2) <input type="checkbox"/> Change	_____	_____	_____
<input type="checkbox"/> Add	_____	_____	_____
<input type="checkbox"/> Remove	_____	_____	_____
3) <input type="checkbox"/> Change	_____	_____	_____
<input type="checkbox"/> Add	_____	_____	_____
<input type="checkbox"/> Remove	_____	_____	_____
4) <input type="checkbox"/> Change	_____	_____	_____
<input type="checkbox"/> Add	_____	_____	_____
<input type="checkbox"/> Remove	_____	_____	_____
5) <input type="checkbox"/> Change	_____	_____	_____
<input type="checkbox"/> Add	_____	_____	_____
<input type="checkbox"/> Remove	_____	_____	_____
6) <input type="checkbox"/> Change	_____	_____	_____
<input type="checkbox"/> Add	_____	_____	_____
<input type="checkbox"/> Remove	_____	_____	_____

H No. 0170 27 P. 5943

(Attach additional sheets, if necessary). (Be specific)

F. If an amendment provides for an exchange, reclassification, or cancellation of issued shares, provisions for implementing the amendment if not contained in the amendment itself:
(if not applicable, indicate N/A)

[illegible]

Jul. 15. 2021 3:52PM

07/15/2021

FN. 017012-P. 62 173

The date of each amendment(s) adoption: _____, if other than the date this document was signed.

07/15/2021

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 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

by _____"
(voting group)

Dated 7/15/2021

Signature Nelsa M Diaz Gilart
(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)

NELSA DIAZ GILART

(Typed or printed name of person signing)

PRESIDENT/DIRECTOR

(Title of person signing)

21 JUL 15 PM 1:54

FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS