P21000029682

(Red	questor's Name)	
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(City	//State/Zip/Phone	e #)
PICK-UP	☐ WAIT	MAIL
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Certified Copies	Certificates	of Status
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06/25/2021 JH



COVER LETTER

TO: Amendment Section Division of Corporations

NAME OF CORPORATION:
DOCUMENT NUMBER:
The enclosed Articles of Amendment and fee are submitted for filing.
Please return all correspondence concerning this matter to the following:
Odricina Priz Escobar Name of Contact Person
Firm/ Company
8215 SW 72nd Ave Apt 1907 Address FL 33143 - City/ State and Zip Code
E-mail address: (to be used for future annual report notification)
For further information concerning this matter, please call:
Odriana Pulz Esceber at (186) 3575174 Name of Contact Person Area Code & Daytime Telephone Number
Inclosed is a check for the following amount made payable to the Florida Department of State:
S35 Filing Fee Certificate of Status Certificate of Status Certificate of Status Certificate of Status (Additional copy is enclosed) Certificate of Status Certificate of Status
Mailing Address Amendment Section Division of Corporations Amendment Section Division of Corporations

Amendment Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314

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

FILED

D. 173 FE CONDECT NAV 14 PH 11: 23

Adriana Luiz		O SECRETARY OF ALL
(<u>Name of Corporati</u>	ion as currently filed with the F	lorida Dept. of State):
P210000	129682	
(Docui	ment Number of Corporation (if k	nown)
Pursuant to the provisions of section 607.1006, Floridits Articles of Incorporation:	a Statutes, this <i>Florida Profit Con</i>	rporation adopts the following amendment(s)
A. If amending name, enter the new name of the co	orporation:	
_Adriana Periz Escabar	P. A.	The new
name must be distinguishable and contain the word "co". "Inc.," or Co.," or the designation "Corp," "Inc, "chartered," "professional association," or the abbre	orporation," "company," or "inc " or "Co". A professional con	orporated" or the abbreviation "Corp.," "poration name must contain the word
B. Enter new principal office address, if applicable (Principal office address MUST BE A STREET ADI	EDRESS)	
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BO	<u></u>	
 If amending the registered agent and/or register new registered agent and/or the new registered 	red office address in Florida, en office address:	ter the name of the
Name of New Registered Agent		
	(Florida street address)	
New Registered Office Address:		Florida
	(City)	(Zip Code)
New Registered Agent's Signature, if changing Reg hereby accept the appointment as registered agent.	istered Agent: I am familiar with and accept the	obligations of the position.
Signa	tture of New Registered Agent, if a	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	<u>171</u>	John Doe	
X Remove	\underline{V}	Mike Jones	
X Add	<u>sv</u>	Sally Smith	
Type of Action (Check One)	<u>Title</u>	<u>Name</u>	<u>Addres</u> s
I)Change		_	
Add			
Remove			
2) Change			
Add			
Remove Change			
Add			
Remove			
4) Change			
Add			
Remove			
5) Change			
Add			
Remove			
6) Change			
Add			
Remove			

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in amendment p	lamonting the amor	aamen u noi co			
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The date of each amendment(s) adoption: 05 11 2021, 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 east 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)
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) (Typed or printed name of person signing) President
(Title of person signing)