P21000030796

(Re	questor's Name)	
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(Cit	ty/State/Zip/Phone	e #)
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☐ ЫСК-ПЬ	WAIT	MAIL
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Certified Copies	_ Certificates	of Status
Special Instructions to	Filing Officer	
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Office Use Only



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COVER LETTER

TO: Amendment Section Division of Corporations

NAME OF CORPORA	ATION: RAMON BODY	SHOP CORP		
DOCUMENT NUMBE	03100003030			_
The enclosed Articles of	Amendment and fee are s	ubmitted for filing.		
Please return all corresp	ondence concerning this ma	atter to the following:		
	RAMON I.	BELTRAN BENAVIDES	:	
_		Name of Contact Perso	อก	
		PRESIDENT		
		Firm/ Company	-	
	84	15 CRESPI BLVD APT 4		
		Address	-	
MIAMI BEACH, FL 33141				<u> با المنابع</u>
City/ State and Zip Code				
	D A MCANIDI	ELTRAN786@GMAIL.CO		, , , , , ,
		sed for future annual report		
		ova tor talane annuar report	. notification)	• • •
For further information c	oncerning this matter, pleas	se call:		7-
RAMON BELTRAN		786 at (328-6853	
Name of	Contact Person		de & Daytime Telephone N	umber
Enclosed is a check for the	ne following amount made	payable to the Florida Depa	artment of State:	
■ \$35 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 Tallahassee, FL 32314		Amend Divisio Clifton	Address Iment Section on of Corporations Building xecutive Center Circle	

Tallahassee, Fl. 32301



July 15, 2021

RAMON L BELTRAN BENAVIDES 8415 CRESPI BLVD APT 4 MIAMI BEACH, FL 33141 US

SUBJECT: RAMON BODY SHOP CORP

Ref. Number: P21000030796

We have received your document for RAMON BODY SHOP CORP and your check(s) totaling \$35.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

The application/form submitted does not meet the requirements of this office; please complete the attached application/form.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6052.

Jalesa S Dennis Regulatory Specialist II

Letter Number: 221A00016305

Articles of Amendment

Articles of Incorporation of

	O1			6 E	5	
RAMOS B	xly Shop Corp		4	4 F	<u>-</u>	
	Corporation as currently	filed with the Florida Dep	t. of State)		= =:	
· <u></u>	1 P21 0000 30		· · · · · · · · · · · · · · · · · · ·	, —	27	. 4.1
	(Document Number of C	Corporation (if known)		,,	=	
D	NOC EL 11- Com ou dels El	land da Dan Ge Camanastian a	danta tha full		سد مقتر	lman
Pursuant to the provisions of section 607.10 its Articles of Incorporation:	06, Florida Statutes, this Pi	oriaa Projii Corporation a	dopis the foli	owing a	annenc	mici
•					,	
A. If amending name, enter the new nan	ne of the corporation:					
			. <u> </u>		The i	
name must be distinguishable and contain the "Inc.," or Co.," or the designation "Co. "chartered," "professional association," o	rp," "Inc." or "Co". A	mpany," or "incorporated" professional corporation i	or the abbre name must co	viation ontain	"Corp the w)" ord
B. Enter new principal office address, if (Principal office address <u>MUST BE A STi</u>				<u> </u>		_
		- "	_	-		_
						_
C. Enter new mailing address, if application (Mailing address MAY BE A POST O						
						
						_
D. If amending the registered agent and	or registered office addre	ss in Florida, enter the na	me of the			
new registered agent and/or the new	registered office address:		 -			
Name of New Registered Agent	Ramon 1 Bel	tran Benavido	6			
Name of New Registered Agent	20.15 0500	PHUD COT I	<u> </u>			
_	(Florida stree	address)				
	Maii Beach			73/	41	
New Registered Office Address:	- KJAITI REALE		_, Florida	(Zip Co	de)	
		****			ŕ	
New Registered Agent's Signature, if ch.	anging Registered Agent:					
I hereby accept the appointment as register	ed agent. I am familiar wi	th and accept the obligatio	ns of the posi	tion.		
	//					
	160					
	Signature of New Re-			_		
	4/	gistered Agent, if changing				
Check if applicable The amendment(s) is/are being filed put	- /					
er the amendment(a) is are being inco pur	.auain to a. 007.0120 (11) (c	. j. i . 3.				

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) X Change	P	RAMON L BELTRAN BENAVIDES	8415 CRESPI BLVD APT 4
Add			MIAMI BEACH, FL 33141
Remove			
2) Change			
Add			
Remove			
3) Change			
Add			
Remove			
4) Change			
Add			
Remove			
5) Change		<u> </u>	
Add			
Remove			
5) Change			
Add			
Remove			

each additional sheets, if necessary).	(Be specific)		
-			
			
			
			<u> </u>
			
			
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n amendment provides for an exc	hanga raclassification or c	ancellation of issued share	S .
ovisions for implementing the am	endment if not contained in	the amendment itself:	··•
(if not applicable, indicate N/A)		-	
	<u> </u>		
			_
		-	
<u>.</u>			

The date of each amendment(s) adoption:	06/11/2021	, if other than the
date this document was signed.	,	
Effective date if applicable:	06/1, /2021 (no more than 90 days after amendment file	
	(no môre than 90 days after amendment file	e date)
Note: If the date inserted in this block does document's effective date on the Department	s not meet the applicable statutory filing requir of State's records.	rements, this date will not be listed as the
Adoption of Amendment(s)	CHECK ONE)	
The amendment(s) was/were adopted by t action was not required.	he incorporators, or board of directors without s	shareholder action and shareholder
☐ The amendment(s) was/were adopted by t by the shareholders was/were sufficient for	he shareholders. The number of votes east for to approval.	he amendment(s)
	the shareholders through voting groups. The foing group entitled to vote separately on the amen	
"The number of votes cast for the ar	mendment(s) was/were sufficient for approval	
by	voting group)	
6	voting group)	
Dated $07/21/2$ Signature	<u>, </u>	
(By a director; p) selected, by an in	esident or other officer – if directors or officers according to the hands of a receiver, trusted ary by that fiduciary)	
Ran	(Typed or printed name of person signing)	
	President	
	(Title of person signing)	