## P2100033715

| (Requestor's Name)                      |
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| PICK-UP WAIT MAIL                       |
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| (Business Entity Name)                  |
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| (Document Number)                       |
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| Certified Copies Certificates of Status |
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| Special Instructions to Filing Officer: |
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Office Use Only



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A. RAMSEY APR 36 2024

| FLORIDA CAPITAL COURIER                                   | <b>SERVICES, INC</b> (850) 524–5437  |
|---|--------------------------------------|
| 2330 CLARE DR   | (850) 524–6243                       |
| TALLAHASSEE, FL 32309                                     | . (850) 491–9625                     |
| Please use funds from this ac<br>Authorization Signature: | Scount: 120210000160: \$35.00        |
| Business Name: MAYOR C                                    | ORIGINALES GM INC                    |
| Document # P2100003                                       | 3715                                 |
| Certified Copy  |                                      |
| Certificate of Status                                     |                                      |
| NEW FILINGS   | <u>AMMENDMENTS</u>                   |
| Profit Corp   | _XAmendment                          |
| Not for Profit  | Resignation of R.A. Officer/Director |
| Limited Liability   | Change of Registered Agent           |
| Domestication   | Revocation of Dissolution            |
| LLLP  | Merger                               |
| CORP  | Articles of Conversion               |
| Other   | Restated Articles of Incorporation   |
| Other   | Statement of Authority               |
| OTHER FILINGS   | REGISTRATION/QUALIFICATIONS          |
| Apostille   | Foreign Filing                       |
| Country   | Reinstatement                        |
|   | Qualification                        |
|   | Annual Report                        |
|   | Fictitious Name                      |

## **COVER LETTER**

TO: Amendment Section
Division of Corporations

| NAME OF CORPORA           | ATION: MAYOR ORIGINA  | ALES GM INC  |   |
|---------------------------|---|--|---|
| DOCUMENT NUMBE            | CR: P21000033715  |  |   |
| The enclosed Articles of  | Amendment and fee are su  | bmitted for filing.  |   |
| Please return all corresp | ondence concerning this ma  | tter to the following:   |   |
|                           | BRE   | NDA A PARTIDAS MAR   | TINEZ   |
| -                         |   | Name of Contact Person   | 1   |
|                           |   | Firm/ Company  |   |
|                           | 11  | 170 NW 11TH ST APT 603   | 3   |
| _                         |   | Address  |   |
|                           | · <del></del>   | MIAMI FL 33136  City/ State and Zip Code                           | <u> </u>  |
| а                         | mazonasinsurance2020@gm   | •  |   |
| _                         |   | sed for future annual report                                       | notification)   |
| For further information   | concerning this matter, pleas   | se call:   |   |
| MARLIN MENDOZA            |   | at ( <sup>407</sup>  | 5082706   |
| Name of                   | Contact Person  |  | de & Daytime Telephone Number   |
| Enclosed is a check for   | the following amount made   | payable to the Florida Dep   | urtment of State:   |
| S35 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)                    |
| Amen<br>Divisi<br>P.O. I  | ng Address dment Section on of Corporations Box 6327 hassee, FL 32314 | Amend<br>Division<br>The C<br>2415 I                               | Address Iment Section on of Corporations entre of Tullahassee N. Monroe Street, Suite 810 assee, FL 32303 |

## Articles of Amendment Articles of Incorporation

FILED

|  | MAYOR ORIGINALES GM INC                                    | 2024 APR 25 PM 12 25   |
|--|--|--|
| (Nan   | of Corporation as currently filed with the Flo             | rida Dept. of State)   |
|  | P21000033715   | ीर है से से इंडिटर्स से कार्या <u>कि</u>                                       |
|  | (Document Number of Corporation (if kno                    | own)   |
| Pursuant to the provisions of section 60 its Articles of Incorporation:  | 7.1006, Florida Statutes, this <i>Florida Profit Corpo</i> | pration adopts the following amendment(s)                                      |
| A. If amending name, enter the new   | name of the corporation:                                   |  |
|  |  | The new  |
| name must be distinguishable and conta<br>"Inc.," or Co.," or the designation '<br>"chartered," "professional association, | "Corp," "Inc, or Co . A projessional corpo                 | porated" or the abbreviation "Corp.," pration name must contain the word       |
| B. Enter new principal office address<br>Principal office address <u>MUST BE</u> A.  | s, if applicable:  STREET ADDRESS )                        |  |
|  |  |  |
|  |  |  |
| Enter new mailing address, if app<br>(Mailing address MAY BE A POST  | licable:   |  |
| (Mailing address NAT BE A TOST   | <u></u>  |  |
|  |  |  |
|  |  |  |
| . If amending the registered agent n   | nd/or registered office address in Florida, enter          | the name of the  |
| new registered agent and/or the ne   | JUAN A LOZANO RODRIGUEZ                                    |  |
| Name of New Registered Agent   | JOAN A COMMON NOTICE                                       |  |
|  |  |  |
|  | (Florida street address)                                   | 22126  |
| N. Danisanad Office Address:   | 1170 NW 11TH ST APT 603 MIAMI                              | , Florida  |
| New Registered Office Address:   | (City)   | (Zip Code)   |
|  |  |  |
|  |  |  |
| w Registered Agent's Signature, if c   | hanging Registered Agent:                                  | livations of the position.   |
| vereby accept the appointment as regist  | cred agent. I am jamiliar with the accept the one          |  |
|  |  |  |
|  | [Ammwam]   |  |
|  | Signatury of New Registered Agent, if cha                  | c address in Florida, enter the name of the oldress:  RODRIGUEZ  Aprofessional |
|  | U U  |  |
| neck if applicable The amendment(s) is/are being filed pu  | rsuant 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)

Example:

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                   | PT 1        | John Doe          |                         |
|----------------------------|-------------|-------------------|-------------------------|
| X Remove                   | <u>v</u>    | Mike Jones        |                         |
| X Add                      | <u>sv</u> s | Sally Smith       |                         |
| Type of Action (Check One) | Title       | Name              | <u>Addres</u> s         |
| I) Change                  | S           | BRENDA A PARTIDAS | 1170 NW 11TH ST APT 603 |
| X Add                      |             | <del></del>       | MIAMI FL 33136          |
| Remove                     |             |                   |                         |
| 2) Change                  | <u>s</u>    | MARIA B QUINTERO  | 7179 SW 3 ST            |
| Add                        |             |                   | MIAMI FL 33144          |
| X Remove Change            |             | <del></del>       |                         |
| Add                        |             |                   |                         |
| Remove                     |             |                   |                         |
| 4) Change                  |             |                   | · ·                     |
| Add                        |             |                   |                         |
| Remove                     |             |                   |                         |
| 5) Change                  |             |                   |                         |
| Add                        |             |                   |                         |
| Remove                     |             |                   |                         |
| 6) Change                  |             |                   |                         |
| Add                        |             |                   |                         |
| Remove                     |             |                   |                         |

| ttach additional sheets, if necessary).  | (Be specific)  |
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| f an amendment provides for an exch  | namee, recinstitication, or cancellation of issued smarts. |
| provisions for implementing the amed   | ndment if not contained in the amendment itself:           |
| f an amendment provides for an exch<br>provisions for implementing the amer<br>(if not applicable, indicate N/A) | ndment it not contained in the amendment itsett.           |
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| provisions for implementing the amed   | ndment it not contained in the amendment itsett.           |

| The date of ea                | 04/24/2024<br>ich amendment(s) adoption:  |          |
|-------------------------------|---|----------|
| date this docum               | nent was signed.  | than the |
| Effective date                | 04/26/2024  |          |
|                               | (no more than 90 days after amendment file date)  |          |
| Note: If the d document's eff | late inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed feetive date on the Department of State's records.   | d as the |
| Adoption of A                 | amendment(s) (CHECK ONE)  |          |
| The amenda                    | ment(s) was/were adopted by the incorporators, or board of directors without shareholder action and shareholder<br>not required.  |          |
| ☐ The amenda                  | ment(s) was/were adopted by the shareholders. The number of votes east for the amendment(s) eholders was/were sufficient for approval.  |          |
| must be sej                   | ment(s) was/were approved by the shareholders through voting groups. The following statement parately provided for each voting group entitled to vote separately on the amendment(s):  number of votes cast for the amendment(s) was/were sufficient for approval |          |
| by _                          | м   |          |
|                               | (voting group)  |          |
|                               | Dated   |          |
|                               | selected by an incorporator – if in the hands of a receiver, trustee, or other court appointed fiduciary by that fiduciary)   |          |
|                               | JUAN A LOZANO RODRIGUEZ   |          |
|                               | (Typed or printed name of person signing)   |          |
|                               | PRESIDENT   |          |
|                               | (Title of person signing)   |          |