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COVER LETTER

TO: Amendment Section Division of Corporations

Tallahassee, FL 32314

NAME OF CORPORA	TION:	RICHUKY MARIN INC	
DOCUMENT NUMBE		P21000033897	
The enclosed Articles of	Amendment and fee are sub	omitted for filing.	
Please return all correspo	ondence concerning this mat	ter to the following:	
		MIRICHUKY MARIN IN	IC .
		Name of Contact Person	
_		Firm/ Company	
		7434 CYPRESS DR	
		Address	
	N	IEW PORT RICHEY, FL	34653
		City/ State and Zip Code	
For further information c	E-mail address: (to be us	ed for future annual report e call:	notification)
ANA G PEREZ		786 at (362-9066 de & Daytime Telephone Number
Name of	Contact Person	Area Coo	de & Daytime Telephone Number
Enclosed is a check for t	he following amount made p	payable to the Florida Depa	artment of State:
S35 Filing Fee	□\$43.75 Filing Fee & Certificate of Status	S43.75 Filing Fee & Certified Copy (Additional copy is enclosed)	S52.50 Filing Fee Certificate of Status Certified Copy (Additional Copy is enclosed)
Ameno Divisio	ng Address Iment Section on of Corporations ox 6327	Amend Divisio	Address ment Section n of Corporations entre of Tallahassee

2415 N. Monroe Street, Suite 810

Tallahassee, FL 32303

Articles of Amendment to Articles of Incorporation of

MIRICHUKY MARIN INC.

	tly filed with the Florida Dept. of State)			
	0033897			
(Document Number of	of Corporation (if known)			
ursuant to the provisions of section 607,1006, Florida Statutes, this s Articles of Incorporation:	s Florida Profit Corporation adopts the following amendment(s)			
. If amending name, enter the new name of the corporation:				
	The new			
ame must be distinguishable and contain the word "corporation," ' Inc.," or Co.," or the designation "Corp," "Inc," or "Co", chartered," "professional association," or the abbreviation "P.A.	A professional corporation name must contain the word			
Enter new principal office address, if applicable:	7434 CYPRESS DR			
Principal office address MUST BE A STREET ADDRESS)	NEW PORT RICHEY, FL 34653			
Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)	7434 CYPRESS DR			
	NEW PORT RICHEY, FL 34653			
). If amending the registered agent and/or registered office ad-	dress in Florida, enter the name of the			
new registered agent and/or the new registered office address	555:			
Name of New Registered Agent				
(Florida s	treet address)			
New Registered Office Address:	Florida			
	(City) (Zip Code)			
New Registered Agent's Signature, if changing Registered Ager	nt.			
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) (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>PT</u>	John Doe	
X Remove	\underline{V}	Mike Jones	
X Add	<u>sv</u>	Sally Smith	
Type of Action	<u>Title</u>	<u>Name</u>	<u>Addres</u> s
(Check One) 1) X Change	P	AMARILYS MARIN MARTINEZ	7434 CYPRESS DR
Add			NEW PORT RICHEY, FL 34653
Remove			
2) Change			
Add	-		
Remove 3) Change			
Add			
Remove			
4) Change			
Add			
Remove			
5) Change			
Add			
Remove			
6) Change			
Add			
Remove			

Attach additional sheets, if necessary,). (Be specific	c)			
CORRECTING PRESIDENT LAST NA	ME				_
					
		 			
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		<u> </u>		<u></u>	
		<u> </u>			
		<u>-</u>	<u>. </u>		<u>.</u>
		.			
If an amendment provides for an expressions for implementing the all	<u>rchange, reclas</u> mendment if n	ssification, or co	ancellation of iss the amendment	iued shares, itself:	
provisions for implementing the an (if not applicable, indicate N/A)	<u>menament n n</u>	<u>v(() (</u>			
					<u>-</u>
	·	· · · · · · · · · · · · · · · · · · ·			

The date of each amendment(s) addate this document was signed.	option:	, if other than th
Effective date <u>if applicable</u> :	(no more than 90 days after amendment file date)	·
	(no more than 90 days after amendment file date)	
Note: If the date inserted in this b document's effective date on the De	ock does not meet the applicable statutory filing requirements, this date will no partment of State's records.	ot be listed as th
Adoption of Amendment(s)	(<u>CHECK ONE</u>)	
The amendment(s) was/were add action was not required.	nted by the incorporators, or board of directors without shareholder action and sh	nareholder
☐ The amendment(s) was/were add by the shareholders was/were su	pted by the shareholders. The number of votes cast for the amendment(s) ficient for approval.	
☐ The amendment(s) was/were app must be separately provided for	roved by the shareholders through voting groups. The following statement each voting group entitled to vote separately on the amendment(s):	
"The number of votes cast	or the amendment(s) was/were sufficient for approval	
by	(voting group)	
	(voting group)	
David		
Dated		
Signature	rector, president or other officer - if directors or officers have not been	
selecte	rector, president or other officer – if directors or officers have not been by an incorporator – if in the hands of a receiver, trustee, or other court diductary by that fiductary)	
	AMARILYS MARIN MARTINEZ	
	(Typed or printed name of person signing)	
	(Title of person signing)	
	,	