P21000037077

| (Requestor's Name) |
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| (Address) |
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| (City/State/Zip/Phone #) |
| PICK-UP WAIT MAIL |
| (Business Entity Name) |
| , , |
| (Document Number) |
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FLORIDA DEPARTMENT OF STATE. Division of Corporations

June 30, 2021

YANET MENDOZA ALVAREZ 3901 SW 78 CT APT 221 MIAMI, FL 33155 US

SUBJECT: CAMPO CORTINAS II CORP

Ref. Number: P21000037077

We have received your document for CAMPO CORTINAS II 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 current name of the entity is as referenced above. Please correct your document accordingly.

The title(s) in the officer/director field(s) is/are not acceptable. Please refer to the following link for acceptable officer/director title information. http://dos.myflorida.com/sunbiz/search/guides/corporation-records/title-abbreviations/

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: 421A00014012

COVER LETTER

TO: Amendment Section Division of Corporations

| NAME OF CORPO | PRATION: CAMPO CORTIN | AS II CORP | | | | |
|---|---|--|---|--|--|--|
| DOCUMENT NUM | 1BER: P21000037077 | | | | | |
| | s of Amendment and fee are su | bmitted for filing. | | | | |
| Please return all corr | espondence concerning this ma | itter to the following: | | | | |
| | YANET MENDOZA ALVA | REZ | | | | |
| | Name of Contact Person | | | | | |
| N/A | | | | | | |
| Firm/ Company | | | | | | |
| | 3901 SW 78 CT APT 221 | 3901 SW 78 CT APT 221 | | | | |
| | - | Address | | | | |
| MIAMI, FL 33155 | | | | | | |
| | | City/ State and Zip Code | | | | |
| | CAMPOCORTINAS@GMA | IL.COM | | | | |
| | E-mail address: (to be us | sed for future annual report i | notification) | | | |
| For further information | on concerning this matter, pleas | | | | | |
| YANET MENDOZA | | at (| 7 284 7318 | | | |
| $\frac{\text{YANET MENDOZA ALVAREZ}}{\text{Name of Contact Person}} = \frac{\text{at} \left(\frac{-7 \& G}{\text{Area Code & Daytime Telephone Numb}}\right)}{\text{Area Code & Daytime Telephone Numb}}$ | | | e & Daytime Telephone Number | | | |
| Enclosed is a check f | or the following amount made | payable to the Florida Depa | rtment of State: | | | |
| S35 Filing Fee | ☐\$43.75 Filing Fee & Certificate of Status | S43.75 Filing Fee & Certified Copy (Additional copy is enclosed) | ☐\$52.50 Filing Fee Certificate of Status Certified Copy (Additional Copy is enclosed) | | | |
| Am Div P.C | iling Address condiment Section distance of Corporations b. Box 6327 lahassee, FL 32314 | Divisior The Ce 2415 N | address nent Section of Corporations ntre of Tallahassee . Monroe Street, Suite 810 (See, FL 32303) | | | |

COVER LETTER

TO: Amendment Section Division of Corporations

| NAME OF CORPO | RATION: CAMPO CORTIN | AS II CORP | |
|-------------------------|---|--|---|
| | BER: P21000037077 | | ·· |
| | of Amendment and fee are su | bmitted for filing. | |
| Please return all corre | spondence concerning this ma | tter to the following: | |
| | YANET MENDOZA ALVA | REZ | |
| | N/A | Name of Contact Persor | 1 |
| | | Firm/ Company | |
| | 3901 SW 78 CT APT 221 | · ···································· | |
| | | Address | |
| | MIAMI, FL 33155 | | |
| | | City/ State and Zip Code | 2 |
| | CAMPOCORTINAS@GMA | IL.COM | |
| | E-mail address: (to be us | sed for future annual report | notification) |
| | on concerning this matter, pleas | | |
| YANET MENDOZA ALVAREZ | | at (| de & Daytime Telephone Number |
| Name of Contact Person | | Area Co | de & Daytime Telephone Number |
| Enclosed is a check for | or the following amount made | 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) | ☐\$52.50 Filing Fee Certificate of Status Certified Copy (Additional Copy is enclosed) |
| Am Dív P.O | iling Address endment Section ision of Corporations . Box 6327 lahassee, FL 32314 | Amend Divisio The Co 2415 N | Address Iment Section on of Corporations entre of Tallahassee N. Monroe Street, Suite 810 ussee, FL 32303 |

Articles of Amendment to Articles of Incorporation of

| (<u>Name</u> | of Corporation as cur | rently filed with the Flo | orida Dept. of State) | |
|---|--|-----------------------------------|---------------------------------|---------------------------------------|
| | (Document Numb | per of Corporation (if kn | own) | |
| Pursuant to the provisions of section 607 ts Articles of Incorporation: | .1006, Florida Statutes. | this Florida Profit Corp | oration adopts the following ar | mendment(s) t |
| A. If amending name, enter the new n | ame of the corporation | <u>n:</u> | | |
| name must be distinguishable and contain "Inc.," or Co.," or the designation "C 'chartered," "professional association, | Corp." "Inc." or "Co | ". A professional corp | rporated" or the abbreviation " | e new Corp.," ne word |
| 3. Enter new principal office address, Principal office address <u>MUST BE</u> A S | N/A | | | |
| C. Enter new mailing address, if appl (Mailing address MAY BE A POST | <u>OFFICE BOX</u>) | N/A | | |
| If amending the registered agent ar new registered agent and/or the new | nd/or registered office w registered office add | address in Florida, ente ress: | er the name of the | • 1 |
| Name of New Registered Agent | N/A | | | |
| | (Floria | la street address) | | 10 |
| New Registered Office Address: | N/A | | , Florida | , , , , , , , , , , , , , , , , , , , |
| | | (City) | Florida (Zip Code | / · <u>·</u> |
| | | | | |

Signature of New Registered Agent, if changing

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 | <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> | Name | <u>Addres</u> s | | | |
| 1) Change | PT | YANET MENDOZA ALVARE | Z 3901 SW 78 TH CT APT 221 | | | |
| X Add | | | MIAMI FL 33155 | | | |
| Remove 2) Change | AMBR | YANET MENDOZA ALVARE | Z 3901 SW 78 TH CT APT 221 | | | |
| X Add | | <u> </u> | MIAM1 FL 33155 | | | |
| Remove 3) Change | | - | | | | |
| Add | | | | | | |
| Remove | | | | | | |
| 4) Change | | | | | | |
| Add | | | | | | |
| Remove | | | | | | |
| 5) Change | | | | | | |
| Add | | | | | | |
| Remove | | | | | | |
| 6) Change | | | | | | |
| Add | | | | | | |
| Remove | | | | | | |

| | s, if necessary).— tBe sp | ecific) | | | |
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| | N/A | Markey of the second |
|--|--|--------------------------|
| The date of each amendment(s) adopted this document was signed. | tion: | If other than the |
| Effective date if applicable: | | |
| | (no more than 90 days after amendment file date) | |
| Note: If the date inserted in this block locument's effective date on the Depart | does not meet the applicable statutory filing requirements, this date witness of State's records. | ill not be listed as the |
| Adoption of Amendment(s) | (CHECK ONE) | |
| The amendment(s) was/were adopted action was not required. | I by the incorporators, or board of directors without shareholder action an | d shareholder |
| The amendment(s) was/were adopted by the shareholders was/were suffici | I by the shareholders. The number of votes east for the amendment(s) ient for approval. | |
| must be separately provided for each | ed by the shareholders through voting groups. The following statement h voting group entitled to vote separately on the amendment(s): | |
| | the amendment(s) was/were sufficient for approval | |
| by | (voting group) | |
| | (voting group) | |
| 4/26/2021 | | |
| Dated | | |
| Signature | | |
| (By a direct selected, by | or, president or other officer – if directors or officers have not been an incorporator – if in the hands of a receiver, trustee, or other court iduciary by that fiduciary) | |
| YA | NET MENDOZA ALVAREZ | |
| | (Typed or printed name of person signing) - Pizミョルモルナ | |
| | (Title of person signing) | |