## P21 000038129

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## **COVER LETTER**

**TO:** Amendment Section Division of Corporations

NAME OF CORPO	DRATION: TORRES HUERT	AS INC			
DOCUMENT NUM	1BER: P21000038129				
	s of Amendment and fee are su	bmitted for filing.			
Please return all corr	espondence concerning this ma	atter to the following:			
	Herman Torres Rodriguez				
		Name of Contact Person	1		
	TORRES HUERTAS INC				
		Firm/ Company			
	1708 VICTORIA POINTE CIR				
	Address				
	WESTON, FL 33327				
	City/ State and Zip Code				
	mgservicesusallc@gmail.cor	n			
	E-mail address: (to be us	sed for future annual report	notification)		
For further informati	on concerning this matter, plea	se call:			
Jorge Mujica		at ( 786	362-1601		
Name	of Contact Person	Area Co	de & Daytime Telephone Number		
Enclosed is a check	for the 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		Street Address Amendment Section Division of Corporations The Centre of Tallahassee			
	llahassee, FL 32314	2415 N. Monroe Street, Suite 810			

Tallahassee, FL 32303

## Articles of Amendment to Articles of Incorporation of

TORRES HUERTAS INC

. .

TORRES HUERTAS INC	<del>, —</del>
(Name of Corporation as currently filed with the Florida Dept. of State	;)
P21000038129	
(Document Number of Corporation (if known)	
Pursuant to the provisions of section 607.1006, Florida Statutes, this <i>Florida Profit Corporation</i> adopts the its Articles of Incorporation:	following amendment(s) to
A. If amending name, enter the new name of the corporation:	
	The new
name must be distinguishable and contain the word "corporation." "company," or "incorporated" or the ab "Inc.," or Co.," or the designation "Corp." "Inc," or "Co". A professional corporation name mus "chartered," "professional association," or the abbreviation "P.A."	
B. Enter new principal office address, if applicable: (Principal office address MUST BE A STREET ADDRESS)	
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)	
D. If amending the registered agent and/or registered office address in Florida, enter the name of the new registered agent and/or the new registered office address:  Name of New Registered Agent	<del></del>
(Florida street address)	
(r tortali street daaress)	
New Registered Office Address:	(Zip Code)
New Registered Agent's Signature, if changing Registered Agent:  I hereby accept the appointment as registered agent. I am familiar with and accept the obligations of the p	osition.
C' CV Design of Land of Landing	21 MAY 17 ASTI: 5
Signature of New Registered Agent, if changing	-<
Check if applicable	7
☐ The amendment(s) is/are being filed pursuant to s. 607.0120 (11) (e), F.S.	279 120
	<del></del> -
	5 <del>5</del>

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>	<u>Name</u>		Address
1) Change	Р	HERNAN TORR	ES RODRIGUEZ	1708 VICTORIA POINTE CIR
Add				WESTON, FL 33327
X Remove				1708 VICTORIA POINTE CIR
2) Change	<u>P</u>	HERMAN TORI	RES RODRIGUEZ	WESTON, FL 33327
X Add				
Remove 3) Change				
Add				
Remove				
4) Change				
Add				· ·
Remove				
5) Change				
Add				
Remove				
6) Change		<del>-</del>		
Add				
Remove				

	additional sheets, if necessary). (Be specific)
lf an z	mendment provides for an exchange, reclassification, or cancellation of issued shares,
provi	sions for implementing the amendment if not contained in the amendment itself:
(	if not applicable, indicate N/A)
	<del>-</del>

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The date of each amendment(s) date this document was signed.	adoption:	, if other than the
date this document was signed.		
Effective date <u>if applicable</u> :	(no more than 90 days after amendment file date)	
Note: If the date inserted in this document's effective date on the I	block does not meet the applicable statutory filing requirements Department of State's records.	s, this date will not be listed as the
Adoption of Amendment(s)	( <u>CHECK ONE</u> )	
The amendment(s) was/were action was not required.	dopted by the incorporators, or board of directors without shareho	lder action and shareholder
☐ The amendment(s) was/were as by the shareholders was/were	lopted by the shareholders. The number of votes cast for the ame sufficient for approval.	ndment(s)
	oproved by the shareholders through voting groups. The following or each voting group entitled to vote separately on the amendment	
"The number of votes car	st for the amendment(s) was/were sufficient for approval	
by	**	
oy	(voting group)	
05/06/202 Dated	21	
Signature	Heren	
(By a	director, president or other officer - if directors or officers have n	
	ed, by an incorporator – if in the hands of a receiver, trustee, or o nted fiduciary by that fiduciary)	ther court
	HERMAN TORRES RODRIGUEZ	
	(Typed or printed name of person signing)	<del></del>
	PRESIDENT	
	(Title of person signing)	