## P21000042389

(Re	equestor's Name)		
(Ad	ddress)		
(Ad	ddress)		
(Cit	ty/State/Zip/Phone	<i>⇒</i> #)	
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## **COVER LETTER**

TO: Amendment Section
Division of Corporations

NAME OF COR	PORATION: QUALITY AND P	RICE TECHNOLOGY, CO	ORP
	UMBER: P21000042389		
	cles of Amendment and fee are su	bmitted for filing.	
Please return all c	orrespondence concerning this ma	tter to the following:	
	GERMAN H PANTOJA SAI	NTIAGO	
		Name of Contact Person	1
		Firm/ Company	
	8310 W POCAHONTAS AV	E	
		Address	
	TAMPA, FL 33615		
		City/ State and Zip Code	e
	GERMANPANTOJA@HOT	MAIL.COM	
	E-mail address: (to be us	sed for future annual report	notification)
For further inform	nation concerning this matter, pleas	se call:	
GERMAN H PA	NTOJA SANTIAGO	at (	408-1665
Na	ime of Contact Person	Area Co	de & Daytime Telephone Number
Enclosed is a chec	ek for the following amount made	payable to the Florida Depa	artment of State:
S35 Filing Fe	e S43.75 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)
J	Mailing Address Amendment Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314	Amend Division The C 2415 i	Address Iment Section on of Corporations entre of Tallahassee N. Monroe Street, Suite 810 assee, FL 32303

## Articles of Amendment to Articles of Incorporation of

QUALITY AND PRICE TECHNOLOGY, CORP.

(Name of Corporation as curre	ntly filed with the Florida Dept. of	State)
P21000042389		
(Document Numbe	r of Corporation (if known)	
Pursuant to the provisions of section 607.1006, Florida Statutes, thits Articles of Incorporation:	nis Florida Profit Corporation adopts	s the following amendment(s) t
A. If amending name, enter the new name of the corporation:		
		The new
name 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 professional corporation name	he abbreviation "Corp.," must contain the word
B. Enter new principal office address, if applicable: (Principal office address <u>MUST BE A STREET ADDRESS</u> )		
C. Enter new weiting all 16 to 15		
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)		7021
	<del></del>	5 5
	<del></del> -	Some North
D. If amending the registered agent and/or registered office ac	ldress in Florida, enter the name o	Othe E E
new registered agent and/or the new registered office addre	ess:	
Name of New Registered Agent		
(Florida	street address)	<del></del>
New Registered Office Address:	Flo	orida
	(City)	(Zip Code)
New Registered Agent's Signature, if changing Registered Age hereby accept the appointment as registered agent. I am familia	nt:	di anno della a
y very ver spromission to regionered agent. I am jamunu	r wan and accept the obligations of t	ne position.
Signature of New	Registered Agent, if changing	
Check if applicable		
☐ The amendment(s) is/are being filed pursuant to s. 607.0120 (11	l) (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.

X Change	<u>PT</u>	John D	<u>oe</u>	
X Remove	<u>V</u>	Mike Jo	ones .	
X Add	<u>sv</u>	Sally S	<u>mith</u>	
Type of Action (Check One)	<u>Title</u>		Name	<u>Addres</u> s
1) X Change	P	_	GERMAN H PANTOJA SANTIAGO	8310 W POCAHONTAS AVE
Add				TAMPA, FL 33615
Remove				
2) X Change	VP	_	LUISA F CASTILLO CASTRO	8310 W POCAHONTAS AVE
Add				TAMPA, FL 33615
Remove 3) Change		_		
Add				
Remove				
4) Change		_		
Add				· · · · · · · · · · · · · · · · · · ·
Remove				
5) Change		<del>-</del> -		
Add				
Remove				
6) Change		_		
Add				
Remove				

If amending or addi (Attach additional she	eets, if necessary).	(Be specific)	<u></u> -		
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If an amendment pr	ovides for an exch	iange, reclassificati	<u>ion, or cancellatio</u>	n of issued shares,	
provisions for impl	le, indicate N/A)	nament it not cont	ained in the amen	dment itself:	
(ly not applicable	io, mateure in.i,				
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06/01/2021 The date of each amendment(s) adoption: \_ \_\_\_\_\_, if other than the date this document was signed. Effective date if applicable: (no more than 90 days after amendment file date) Note: If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as the document's effective date on the Department of State's records. (CHECK ONE) Adoption of Amendment(s) ☐ The amendment(s) was/were adopted by the incorporators, or board of directors without shareholder action and shareholder action was not required. The amendment(s) was/were adopted by the shareholders. The number of votes cast for the amendment(s) by the shareholders was/were sufficient for approval. ☐ The amendment(s) was/were approved by the shareholders through voting groups. The following statement must be separately provided for each voting group entitled to vote separately on the amendment(s): "The number of votes cast for the amendment(s) was/were sufficient for approval (voting group) 06/01/2021 Dated Signature (By a director president or other officer - if directors or officers have not been selected by an incorporator - if in the hands of a receiver, trustee, or other court appointed fiduciary by that fiduciary) GERMAN H PANTOJA SANTIAGO (Typed or printed name of person signing) PRESIDENT

(Title of person signing)