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From:

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Account Name

: GG CONSULTING SERVICES CORP

-- Account Number : I20210000143

ö Phone

: (786)631-8656

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## COR AMND/RESTATE/CORRECT OR O/D RESIGN **RECARGAS24HRS, INC**

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## COVER LETTER

TO: Amendment Section
Division of Corporations

NAME OF CORPOR	ATION: RECARGAS24HR	s, inc	<u> </u>
DOCUMENT NUMB	D21000055055	<u> </u>	
The enclosed Articles of	of Amendment and fee are sub	omitted for filing.	
Please return all corres	pondence concerning this mat	ter to the following:	
	ALEXIS FROMETA		·
•		Name of Contact Person	
	ALEXIS FROMETA P.A		
	<u> </u>	Firm/ Company	
	3191 CORAL WAY #404 A		
-		Address	
	MIAMI, FL 33145		
-		City/State and Zip Code	
	afrometa@south-floridacpa.co	oin	
-	E-mail address: (to be us	ed for future annual report:	notification)
For further information	a concerning this matter, pleas	e call:	
ALEXIS FROMETA		at (	319-1071
Neme o	f Contact Person		le & Daytime Tolophone Number
Enclosed is a check for	the following amount made p	payable to the Florida Depa	rtment of State:
\$35 Filing Foo	☐\$43.75 Filing Fee & Certificate of Status	☐\$43.75 Filing Fee & Certified Copy (Additional copy is enclosed)	F 1352.50 Filing Feo Certificate of Status Certified Copy (Additional Copy is enclosed)
Ame Divis P.O.	ling Address Induction Section Sion of Corporations Box 6327 Ihassoo, I'L 32314	Amend: Division The Ce 2415 N	Address ment Section of Corporations intre of Tallahassee Monroe Street, Suite 810

FILED

Articles of Amendment Articles of Incorporation of

2022 SEP 23 AH 8: 10 SECRETARY OF 11: TALL AHASSET, 11:

Check if applicable

☐ The amendment(s) is/are being filed pursuant to s. 607.0120 (11) (e), F.S.

RECARGAS24HRS, INC		· · · · · · · · · · · · · · · · · · ·	
	Corporation as curren	ly filed with the Florida Dept.	of State)
21000055955			
	(Document Number	of Corporation (if known)	
nursuant to the provisions of section 607.1 8 Articles of Incorporation:	006, Florida Statutes, this	Florida Profit Corporation ado	pts the following amendment
. If amending name, enter the new na	me of the corporation:		
I/A			The new
ame must be distinguishable and contain Inc.," or Co.," or the designation "C chartered," "professional association,"	orp," "Inc," or "Co".	A professional corporation na	r the abbreviation "Corp.,"
B. Enter new principal office address, I Principal office address MUST BE A ST		N/A	
Tutciput office dualess intog t the A & I	<u>KEET ADDRESS</u> )		
. Enter new mailing address, if applie (Mailing address MAY BE A POST C		N/A	
		<del></del>	
	•		
. If amending the registered agent an	dior registered office ad	lress in Florida, enter the nam	e of the
new registered agent and/or the new	registered office addres	<u>s:</u>	
Name of New Registered Agent	N/A		
	(Florida s	rout addruss)	
Now Registered Office Address	N/A		Florida
NOW NEEDSTEING OFFICE Address.	<u>-</u>	(City)	(/.lp Code)
New Revistered Office Address:			Florida(/.lp Code
lew Registered Agent's Signature, if ch hereby accept the appointment as registe			of the position.
,	<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	PI	John Dog	
X Romove	<u>v</u>	Mike Jones	
_X Add	<u>sv</u>	Sally Smith	
Type of Action (Check One)	Title	Name	<u>Address</u>
l) X Change	P	RANDOLPH O SANCHEZ B	9119 SW 149TH CT
Add		-	MIAMI, FL 33196
Remove			
2) X Change	P	JOSE GUILLERMO J ADRIAN	ALDANA 480 MORNINGSIDE DR
Add			MIAMI SPRINGS, FL 33166
Remove Change			
Add			
Remove			
4) Change			
Add			<u>.</u>
Remove			
5) Change			
Add			
Remove			<del></del>
6)Cliange			<u> </u>
Add			
Remove			

If amending or adding additional Articles, enter change(s) here:  (Attach additional sheets, if necessary). (Be specific)	
N/A	,
	·
<u> </u>	
<u> </u>	
F. If an amendment provides for an exchange, reclassification, or cancellation of issued shares,	
provisions for implementing the amendment if not contained in the amendment itself:	
(If not applicable, indicate N/A)	
N/A	

	September 21, 2022	
	t(s) adoption:, if other ti	ian the
date this document was signed		
Effective date if applicable:	September 21, 2022	
	(no more than 90 days after amendment file date)	
Note: If the date inserted in document's effective date on the	this block does not meet the applicable statutory filing requirements, this date will not be listed he Department of State's records.	as the
Adoption of Amendment(s)	(CHECK ONE)	
☐ The amendment(s) was/wer action was not required.	re adopted by the incorporators, or bourd of directors without shareholder action and shareholder	
☐ The amendment(s) was/wor by the shareholders was/we	ro adopted by the shareholders. The number of votes east for the amendment(s) ere sufficient for approval.	
	re approved by the shareholders through voting groups. The following statement ed for each voting group entitled to vote separately on the amendment(s):	
"The number of votes	s cast for the amendment(s) was/were sufficient for approval	
by 100%	P.	
	(voting group)	
09/21/	/2022	
Dated		
Ø!		
Signature	By a director, president or other officer - if directors or officers have not been	
' se	elected, by an incorporator - if in the hands of a receiver, trustee, or other court popointed fiduciary by that fiduciary)	
	EDWARD VICENTE ROJAS AGUERO	
	(Typed or printed mane of person signing)	
	PRESIDENT	
	(Title of person signing)	