P21000098731

(Requestor's Name)
(Address)
(Address)
(City/State/Zip/Phone #)
PICK-UP WAIT MAIL
(Business Entity Name)
(Dushiess Littly Name)
(Document Number)
(Document Number)
0.45-40
Certified Copies Certificates of Status
Special Instructions to Filing Officer:

Office Use Only



400370366354

anena

03/20/21--01005--005 **35.00

SEP 2 9 2021 A RAMS2 -

COVER LETTER

T(O: Amendment Section Division of Corporations

NAME OF CORPO	RATION: LA ACADEMIA I	PROPERTIES CORP			
DOCUMENT NUM					
The enclosed Articles	of Amendment and fee are su	bmitted for filing.			
Please return all corre	spondence concerning this ma	tter to the following:			
	ELENA DIAZ				
		Name of Contact Person	1		
	GLADES COMPANY SERVICES CORP				
	Firm/ Company				
	1940 WILSON STREET				
	Address				
	HOLLYWOOD,FLORIDA 33020				
	City/ State and Zip Code				
	ediaz@gladescs.com				
		sed for future annual report	notification)		
For further informatio	n concerning this matter, plea		、423- 0558		
Name of Contact Person		Area Co) 423- 0558 de & Daytime Telephone Number		
Enclosed is a check for	or the following amount made				
\$35 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)		
Mailing Address Amendment Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314		Street Address Amendment Section Division of Corporations The Centre of Tallahassee 2415 N. Monroe Street, Suite 810			

Tallahassee, FL 32303

Articles of Amendment to Articles of Incorporation of

2021 SEP 20 PM 12 30

LA ACADEMIA PROPERTIES CORP

(Name of Corporation	as currently filed with the Florida Dept. of State
P21000058731	
(Documen	nt Number of Corporation (if known)
Pursuant to the provisions of section 607.1006, Florida S its Articles of Incorporation:	tatutes, this Florida Profit Corporation adopts the following amendment(s) to
A. If amending name, enter the new name of the corp	poration:
N/A	The new
name must be distinguishable and contain the word "corp" Inc.," or Co.," or the designation "Corp," "Inc," o "chartered," "professional association," or the abbrevio	poration," "company," or "incorporated" or the abbreviation "Corp.," or "Co". A professional corporation name must contain the word
B. Enter new principal office address, if applicable:	1532 SCARLETT AVE
(Principal office address MUST BE A STREET ADDR.	NORTH PORT,FL 34289
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)	1532 SCARLETT AVE
	NORTH PORT.FL 34289
D. If amending the registered agent and/or registered new registered agent and/or the new registered off	
Name of New Registered Agent N/A	· · · · · · · · · · · · · · · · · · ·
	(Florida street address)
New Registered Office Address: N/A	, Florida
	(City) (Zip Code)
New Registered Agent's Signature, if changing Regist I hereby accept the appointment as registered agent. I a	t <mark>ered Agent:</mark> un familiar with and accept the obligations of the position.
Signatu	re 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)

Rlease 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	<u>V</u>	Mike Jones	
X Add	<u>sv</u>	Sally Smith	
Type of Action (Check One)	<u>Title</u>	<u>Name</u>	<u>Addres</u> s
1) Change	P/S	TOPACIO SERVICES LLC	6175 NW 153RD Street, Suite 201
Add			MIAMI LAKES, FL 33014
X Remove			
2) Change	P/S	NATALIA GALLO ERRANDONEA	1532 SCARLETT AVE
X Add			NORTH PORT, FL 34289
Remove 3) Change			
Add			
Remove			
4) Change			
Add			
Remove			
5) Change			
Add			
Remove			
6) Change			
Add			
Remove			

E. If amending or adding additional Articles, enter change(s) here: (Auach additional sheets, if necessary). (Be specific)
N/A
<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
· · · · · · · · · · · · · · · · · · ·

· .

The date of each amendment(s) a date this document was signed.	doption:	, if other than the
Effective date if applicable:		
	(no more than 90 days after amendment f	île date)
Note: If the date inserted in this bedocument's effective date on the De	block does not meet the applicable statutory filing requepartment of State's records.	sirements, this date will not be listed as the
Adoption of Amendment(s)	(CHECK ONE)	
The amendment(s) was/were add action was not required.	opted by the incorporators, or board of directors withou	t shareholder action and shareholder
☐ The amendment(s) was/were add by the shareholders was/were so	opted by the shareholders. The number of votes cast for afficient for approval.	r the amendment(s)
	proved by the shareholders through voting groups. The each voting group entitled to vote separately on the an	
"The number of votes cast	for the amendment(s) was/were sufficient for approval	
by		•
	(voting group)	
	irector, president or other officer – if directors or office d, by an incorporator – if in the hands of a receiver, true	
	ted fiduciary by that fiduciary)	nee, or other evaluation
	NATALIA GALLO ERRANDONEA	
	(Typed or printed name of person signing)	
	PRESIDENT	
	(Title of person signing)	