P21000063627

(Re	equestor's Name)	
(Ad	dress)	
(Ad	dress)	
(Cit	y/State/Zip/Phone #	r)
☐ PICK-UP	WAIT	MAIL
(Bu	siness Entity Name)
(Document Number)		
Certified Copies	_ Certificates o	f Status
Special Instructions to	Filing Officer:	
	OCT 24 MORNE	





300437073603

10/07/24--01028--010 **35.00

7624 CCT - 7 TET 4: 18

COVER LETTER

TO: Amendment Section Division of Corporations

:

NAME OF CORPOR	RATION: CORP		
DOCUMENT NUME	P21000063627		
The enclosed Articles	of Amendment and fee are sub	omitted for filing.	
Please return all corres	pondence concerning this mat	ter to the following:	
	ROBERTO CANO		
		Name of Contact Person	
		Firm/ Company	
	3210 SW 27TH TERRACE		
		Address	
	MIAMI, FL. 33133		
		City/ State and Zip Code	2
	RCMENESES@HOTMAIL.	СОМ	
	E-mail address: (to be us	ed for future annual report	notification)
For further informatio	n concerning this matter, pleas	se call:	
ROBERTO CANO		at (<u>305</u>	205-5812
Name (of Contact Person	Area Coo	de & Daytime Telephone Number
Enclosed is a check for	r the following amount made p	payable to the Florida Depa	irtment of State:
S35 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)
Ame Divi P.O	ling Address endment Section sion of Corporations Box 6327 ahassee, FL 32314	Amend Divisio The Co 2415 N	Address Iment Section In of Corporations Centre of Tallahassee V. Monroe Street, Suite 810 Essee, FL 32303

Articles of Amendment to Articles of Incorporation of

Theath

IC3J BEST CORP

2024 00 7 - 7 | F11 4: 18

(Name of Corporation as curren	ntly filed with the Florida Dept. of State)	
P21000063627		
(Document Number	of Corporation (if known)	
Pursuant to the provisions of section 607.1006, Florida Statutes, thi its Articles of Incorporation:	is Florida Profit Corporation adopts the following amendment(s)	
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	A professional corporation name must contain the word	
B. Enter new principal office address, if applicable:	14951 SW 74TH TERRACE	
(Principal office address <u>MUST BE A STREET ADDRESS</u>)	MIAMI, FL. 33193	
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)	14951 SW 74TH TERRACE	
· · · · · · · · · · · · · · · · · · ·	MIAMI, FL. 33193	
D. If amending the registered agent and/or registered office ad	ldress in Florida, enter the name of the	
new registered agent and/or the new registered office addre		
Name of New Registered Agent		
(Florida :	strect address)	
New Registered Office Address:	. Florida	
	(City) (Zip Code)	
Non-Donistan de America Cimpera (C. 1997)		
New Registered Agent's Signature, if changing Registered Agen I hereby accept the appointment as registered agent. I am familia.		
GI	December 11 and 12 and	
Signature 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)

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>	<u>Addres</u> s
1) Change	VP	JOHANNA ALVARADO	11060 SW 143RD PLACE
Add			MIAMI, FL. 33186
X Remove 2) X Change	P	CARLOS ALVARADO	11060 SW 143RD PLACE
Add			MIAMI, FL. 33186
Remove Change	VP	JULISSA F. MEDINA	11060 SW 143RD PLACE
Add			MIAMI, FL. 33186
Remove			
4) Change			
Add			
Remove			<u></u>
5) Change			
Add			
Remove			
6) Change			
Add			
Remove			

f amending or adding additional Artic Attach additional sheets, if necessary).	(Be specific)
	····
,	
f an amendment provides for an exch	ange, reclassification, or cancellation of issued shares,
(if not applicable, indicate N/A)	ndment if not contained in the amendment itself:
(ij not appricative, trancate 1414)	
,	

.

The date of each amendment(s) ac	10/01/2024 loption:	, if other than th
date this document was signed.	1/2024	
Effective date if applicable:		
	(no more than 90 days after amendment file date)	
Note: If the date inserted in this b document's effective date on the De	ock does not meet the applicable statutory filing requirements, dipartment of State's records.	his date will not be listed as t
Adoption of Amendment(s)	(CHECK ONE)	
The amendment(s) was/were add action was not required.	pted by the incorporators, or board of directors without shareholde	er action and shareholder
☐ The amendment(s) was/were add by the shareholders was/were su	pted by the shareholders. The number of votes cast for the amend flicient for approval.	ment(s)
	roved by the shareholders through voting groups. The following st cach voting group entitled to vote separately on the amendment(s)	
"The number of votes cast	for the amendment(s) was/were sufficient for approval	
by	ŗ	
,	(voting group)	
Dated	Julissa Federa	h
selecte	region, president or other office — if directors or officers have not by an incorporator — if in the hands of a receiver, trustee, or othe ed fiduciary by that fiduciary)	
	JULISSA F. MEDINA	
	(Typed or printed name of person signing)	
	PRESIDENT	
	(Title of person signing)	