P21 000063849

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COVER LETTER

TO: Amendment Section Division of Corporations

NAME OF CORPO	RATION:	SIMENTS CORP	<u>.</u>	
DOCUMENT NUMBER: P21000063849				
	s of Amendment and fee are su	bmitted for filing.		
Please return all corre	espondence concerning this ma	tter to the following:		
	CATHERINE CARDONA			
	Name of Contact Person			-
	Firm/ Company			
	442 DUNDEE CT			_
	NAPLES, FL 34104	Address		_
	NAPLES, PL 34104	City/ State and Zip Code	<u>. </u>	-
	CARDONACATHY@HOTN	AAIL.COM		
	E-mail address: (to be us	ed for future annual report	notification)	
For further information	on concerning this matter, pleas	e cali:		
CATHERINE CARL	OONA	786 at (838-2675	
Name	of Contact Person	Area Co	_) de & Daytime Telephone Numbe	 2Г 5-3
Enclosed is a check fi	or the following amount made	payable to the Florida Depa	artment of State;	2022
S35 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 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

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(Name of Corporation as currently	filed with the Florida Dept. of State)	
P21000063849		
(Document Number of	Corporation (if known)	
Pursuant to the provisions of section 607.1006, Florida Statutes, this <i>I</i> its Articles of Incorporation:	Torida Profit Corporation adopts the foll	owing amendment(s) to
A. If amending name, enter the new name of the corporation:		
		Thenew
name must be distinguishable and contain the word "corporation," "co "Inc.," or Co.," or the designation "Corp," "Inc," or "Co". A "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 addr new registered agent and/or the new registered office address:	ess in Florida, enter the name of the	F-3
Name of New Registered Agent		, i,j
(Florida stre	et address)	<u> </u>
New Registered Office Address:	, Florida	
		(Zip Code) 5
		\mathcal{C}
Now Desirtaned Ament's Countries of shanning Desirtaned Assets		,
New Registered Agent's Signature, if changing Registered Agent: I hereby accept the appointment as registered agent. I am familiar w	ith and accept the obligations of the posit	ion.
Signature of New Re	gistered 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)

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	PT	<u>John Doe</u>	
X Remove	<u>V</u>	Mike Jones	
X Add	<u>sv</u>	Salty Smith	
Type of Action (Check One)	<u>Title</u>	Name	Address
1) Change	VP	ISABELLA VALENCIA	442 DUNDEE CT
X Add			NAPLES.FL 34104
Remove			
2) Change			
Add			
Remove 3) Change			
Add			
Remove			
4) Change			
Add			
Remove			
5) Change		_	
Add			
Remove			
6) Change			
Add			
Remove			

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

•

The date of each amendment() adoption:	, if other than the
date this document was signed.		
Effective date <u>if applicable</u> :	09/02/2022	
isneetive date <u>it applicable</u> .	(no more than 90 days after amendment fi	le date)
Note: If the date inserted in the document's effective date on the	is block does not meet the applicable statutory filing required Department of State's records.	frements, 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.	adopted by the incorporators, or board of directors without	shareholder action and shareholder
☐ The amendment(s) was/were by the shareholders was/wer	adopted by the shareholders. The number of votes cast for e sufficient for approval.	the amendment(s)
	approved by the shareholders through voting groups. The j	
"The number of votes of	ast for the amendment(s) wastwere sufficient for approval	
by	Consegroup)	
Dated	09-02-2022	
Signature	/	
sele	a director, president or other officer - if directors or officer cted, by an incorporator - if in the hands of a receiver, trustointed fiduciary by that fiduciary)	
	CATHERINE CARDONA	
	(Typed or printed name of person signing)	
	PRESIDENT	
	(Title of person signing)	