P2100064926

(Requ	uestor's Name)			
(Addr	ess)			
(Addr	ess)			
(City/	State/Zip/Phone #	#)		
PICK-UP	☐ WAIT	MAIL MAIL		
(Busi	ness Entity Name	e)		
(Docu	ıment Number)	<u></u>		
Certified Copies Certificates of Status				
Special Instructions to Filing Officer:				
J. HORNE DEC 16 2021				

Office Use Only



000377025600

12/02/21--01010--007 **35.00

FILED
2021 DEC -2 MH 4: 26
SECRELARY OF SHAPE
SECRE

COVER LETTER

Division of Corporations NAME OF CORPORATION: The enclosed Articles of Amendment and fee are submitted for filing. Please return all correspondence concerning this matter to the following: E-mail address: (to be used For further information concerning this matter, please call: Enclosed is a check for the following amount made payable to the Florida Department of State: \$35 Filing Fee □\$43.75 Filing Fee & □\$43.75 Filing Fee & ☐\$52.50 Filing Fee Certificate of Status Certified Copy Certificate of Status (Additional copy is Certified Copy enclosed) (Additional Copy is enclosed)

Mailing Address

TO: Amendment Section

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

FILED

of

2021 DEC -2 AM 4: 26 DE STATE

ANV thte	rorise Coro SECRETARY
	currently filed with the Florida Dept. of State) JALLAHASSEE
	206492 V
(Document i	Number of Corporation (if known)
Pursuant to the provisions of section 607.1006, Florida Statits Articles of Incorporation:	utes, this Florida Profit Corporation adopts the following amendment(s)
A. If amending name, enter the new name of the corpor	ration:
	The new
name must be distinguishable and contain the word "corpore". "Inc.," or Co.," or the designation "Corp." "Inc.," or "chartered," "professional association," or the abbreviation.	ation," "company," or "incorporated" or the abbreviation "Corp.," "Co". A professional corporation name must contain the word on "P.A."
B. Enter new principal office address, if applicable:	_8922 NW 145 lane
(Principal office address MUST BE A STREET ADDRES	S)
	Miamilakes, FL 33018
C. Enter new mailing address, if applicable:	2000 105
(Mailing address MAY BE A POST OFFICE BOX)	8922 NW 145 lane
	Miami Lakes Fr 33018
	,
D. If amending the registered agent and/or registered of	fice address in Florida, enter the name of the
new registered agent and/or the new registered office	address:
Name of New Registered Agent	
(F	lorida street address)
New Registered Office Address:	Florida
	(City) (Zip Code)
New Registered Agent's Signature, if changing Registered	d Avent:
hereby accept the appointment as registered agent. I am for	amiliar with and accept the obligations of the position.
10	
Signature o	f 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.

Example:

\underline{X} Change	PT Jol	<u>ın Doc</u>	
X Remove	<u>V</u> <u>Mi</u>	ke Jones	
<u>X</u> Add	<u>SV</u> <u>Sal</u>	lly Smith	
Type of Action (Check One)	<u>Title</u>	Name	<u>Addres</u> s
1) Change	<u> </u>	Ariel Nunez	8922 NW 14511. Miamilanos, Fl 33019
Add			Miamilakes, FL 33019
Remove			
2) Change			
Add -			
Remove 3) Change			
Add			
Remove			
4) Change			
Add			
Remove			
5) Change			
Add			
Remove			
რ) Change			
Add			
Remove			

	sheets, if necessary).	iBe specific)			
	_				
			-	_	
					-
				<u> </u>	
					
					
-			<u> </u>		
				<u> </u>	·
					
	- · ·				
		<u></u>			
				·	
·					
			· .	-	<u> </u>
					
amendment p	rovides for an excha	inge, reclassificati	on, or cancellatio	on of issued share	<u>s,</u>
· · · · · · · · · · · · · · · · · · ·	olementing the amen ble, indicate N/A)	dment if not conta	ined in the amer	ndment itself:	_
vy von appricas	ne. mateme way				
		······································			
		<u>_</u>			

The date of each amendm	ient(s) adoption:	11/17	2021	
date this document was sig	ned.			, if other than the
Effective date if applicabl	<u>e</u> :	[1]	1/2021	
	(no	more than 90 days	after amendment file d	ale)
Note: If the date inserted document's effective date of	in this block does not m in the Department of Stat	eet the applicable se's records.	tatutory filing requiren	nents, this date will not be listed as the
Adoption of Amendment(
The amendment(s) was/action was not required.	were adopted by the incor	rporators, or board	of directors without shar	reholder action and shareholder
☐ The amendment(s) was/v by the shareholders was	were adopted by the share /were sufficient for appro	cholders. The numb	per of votes cast for the	amendment(s)
☐ The amendment(s) was/v	vere approved by the sha ided for each voting grou	reholders through v p entitled to vote so	oting groups. The follo parately on the amenda	win g statement nent(s):
	tes cast for the amendme			`,
	(voting g	roup)	· · · · · · · · · · · · · · · · · · ·	
Dated	11/17/2	021		
Signature				
J	(By a director, president of selected, by an incorpora appointed fiduciary by th	tor – if in the hands	directors or officers hav of a receiver, trustee, o	re not been or other court
	(Typec	Ari-e	L Nune	2
	_ /		1	
	(Tit k e	of person signing)		