

6/23/22, 3:14 PM

Division of Corporations

**PZ10000129950**

Florida Department of State  
Division of Corporations  
Electronic Filing Cover Sheet

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Account Number : 120170000027  
Phone : (305)603-9524  
Fax Number : ~~(555)555-5555~~ 305 200-0135

\*\*Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please.\*\*

Email Address: Lisbeth.Supertaxplus@gmail.com

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

2022 JUL -1 AM 10:00

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**COR AMND/RESTATE/CORRECT OR O/D RESIGN**  
**MITECNOVA INC**

|                       |         |
|-----------------------|---------|
| Certificate of Status | 0       |
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| Page Count            | 01      |
| Estimated Charge      | \$35.00 |

JUL - 5 2022

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TALLAHASSEE, FL

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Corporate Filing Menu

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COVER LETTER

TO: Amendment Section  
Division of Corporations

NAME OF CORPORATION: Mitecnova Inc.

DOCUMENT NUMBER: P21000069950

The enclosed *Articles of Amendment* and fee are submitted for filing.

Please return all correspondence concerning this matter to the following:

Lizbeth Beltrán  
Name of Contact Person

All Express tax multiservices uc  
Firm/ Company

1275 west 47<sup>th</sup> PL suite 315  
Address

Hialeah, FL 33012  
City/ State and Zip Code

Lisbeth-supertaxplus@gmail.com  
E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Lizbeth Beltrán at (786) 656-2034  
Name of Contact Person Area Code & Daytime Telephone Number

Enclosed is a check for the following amount made payable to the Florida Department of State:

- |                                          |                                                                        |                                                                                                     |                                                                                                                            |
|------------------------------------------|------------------------------------------------------------------------|-----------------------------------------------------------------------------------------------------|----------------------------------------------------------------------------------------------------------------------------|
| <input type="checkbox"/> \$35 Filing Fee | <input type="checkbox"/> \$43.75 Filing Fee &<br>Certificate of Status | <input type="checkbox"/> \$43.75 Filing Fee &<br>Certified Copy<br>(Additional copy is<br>enclosed) | <input type="checkbox"/> \$52.50 Filing Fee<br>Certificate of Status<br>Certified Copy<br>(Additional Copy<br>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

Mitecnova Inc.

(Name of Corporation as currently filed with the Florida Dept. of State)

P21000069950

(Document Number of Corporation (if known))

FILED  
2022 JUL -1 AM 11:00  
TALLAHASSEE, FLORIDA

Pursuant to the provisions of section 607.1006, Florida Statutes, this *Florida Profit Corporation* adopts the following amendment(s) to its Articles of Incorporation:

A. If amending name, enter the new name of the corporation:

N/A The new name must be distinguishable and contain the word "corporation," "company," or "incorporated" or the abbreviation "Corp.," "Inc.," or "Co.," or the designation "Corp.," "Inc.," or "Co.". A professional corporation name must contain the word "chartered," "professional association," or the abbreviation "P.A."

B. Enter new principal office address, if applicable:

(Principal office address MUST BE A STREET ADDRESS)

N/A

C. Enter new mailing address, if applicable:

(Mailing address MAY BE A POST OFFICE BOX)

N/A

D. If amending the registered agent and/or registered office address in Florida, enter the name of the new registered agent and/or the new registered office address:

Name of New Registered Agent

N/A

(Florida street address)

New Registered Office Address:

(City)

Florida

(Zip Code)

New Registered Agent's Signature, if changing Registered Agent:

I hereby accept the appointment as registered agent. I am familiar with and accept the obligations of the position.

Signature of New Registered Agent, if changing

Check if applicable

☐ The amendment(s) is/are being filed pursuant to s. 607.0120 (1)(c), 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 PT 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      PT      John Doe

X Remove      V      Mike Jones

X Add      SV      Sally Smith

Type of Action:  
(Check One)

Title

Name

Address

1) X Change

T

Carlos A. Correa Suarez 5375 NW 7th St Apt 751  
Miami, FL 33126

     Add

X Remove

2)      Change

V

Sandra M. Piedrahita Ortiz 5375 NW 7th St Apt 751  
Miami, FL 33126

X Add

     Remove

3) X Change

D

Hugo A. Gomez Rodriguez 5375 NW 7th St Apt 751  
Miami, FL 33126

     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:  
(Attach additional sheets, if necessary). (Be specific)

Remove (T) Carlos A. Correa Suarez  
5375 NW 7<sup>th</sup> St Apt 751  
Miami, FL 33126

Add (V) Sandra M. Piedrahita Ortiz  
5375 NW 7<sup>th</sup> St Apt 751  
Miami, FL 33126

change (D) Hugo A. Gomez Rodriguez  
5375 NW 7<sup>th</sup> St Apt 751  
Miami, FL 33126

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) adoption: 06/22/22 if other than the date this document was signed

Effective date if applicable: \_\_\_\_\_  
(no more than 90 days after amendment file date)

Note: If the date entered in this block does not meet the applicable statutory filing requirements, this date will not be listed as the document's effective date on the Department of State's records

Adoption of Amendment(s) (CHECK ONE)

- ☒ The amendment(s) was/were adopted by the incorporators, or board of directors without shareholder action and shareholder action was not required
- ☐ The amendment(s) was/were adopted by the shareholders. The number of votes cast for the amendment(s) by the shareholders was/were sufficient for approval.
- ☐ The amendment(s) was/were approved by the shareholders through voting groups. The following statement must be separately provided for each 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 \_\_\_\_\_  
(voting group)"

Dated 06/22/22

Signature: \_\_\_\_\_

(By a director, president or other officer – if directors or officers have not been selected, by an incorporator – if in the hands of a receiver, trustee, or other court appointed fiduciary by that fiduciary)

Alfonso Delgado Serrano  
(Typed or printed name of person signing)

P  
(Title of person signing)

FILED  
2022 JUL -1 AM 11:00  
TALLAHASSEE, FLORIDA  
DEPARTMENT OF STATE