P21000079594

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STUALIARY OF STATE TALLAHASSEE, FLORIDA

JUN 2 3 2022 S, PRATHER

COVER LETTER

TO: Amendment Section Division of Corporations

NAME OF CORPOR	RATION: CASHING 4 U CO	RP				
DOCUMENT NUME	BER: P21000079594					
The enclosed Articles	of Amendment and fee are sub	omitted for filing.				
Please return all corres	pondence concerning this mat	ter to the following:				
	GABRIEL C BELLONI					
	Name of Contact Person					
Firm/ Company						
	5323 MILLENIA LAKES BL	VD STE 300				
		Address				
	ORLANDO, FL 32839					
		City/ State and Zip Code				
	ajaffordableservices@gmail.c	om				
	E-mail address: (to be use	ed for future annual report	notification)			
For further information	n concerning this matter, pleas	e call:				
GABRIEL C. BELLONI		at (5600105			
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	rtment of State:			
■ \$35 Filing Fee	☐\$43.75 Filing Fee & Certificate of Status	S43.75 Filing Fee & Certified Copy (Additional copy is enclosed)	□\$52.50 Filing Fee Certificate of Status Certified Copy (Additional Copy is enclosed)			
Ame Divi P.O.	ling Address Indiment Section Ission of Corporations Box 6327 Ishassee, FL 32314	Amend Divisio The Co 2415 N	Address ment Section n of Corporations entre of Tallahassee J. Monroe Street, Suite 810 ssee, FL 32303			

Articles of Amendment to Articles of Incorporation of

CASHING 4 U CORP		
(Name of Corpora	ation as currently filed with the Florida Dept. of State)	- <u>2011</u>
P21000079594		
(Doct	ument Number of Corporation (if known)	25
Pursuant to the provisions of section 607.1006, Flori its Articles of Incorporation:	ida Statutes, this Florida Profit Corporation adopts the follo	owing amendme
A. If amending name, enter the new name of the	corporation:	
man mark Main with Man American	"corporation," "company," or "incorporated" or the abbres	The new
"Inc.," or Co.," or the designation "Corp," "Inc "chartered," "professional association," or the abb	c." or "Co". A professional corporation name must co	nation Corp., intain the word
B. Enter new principal office address, if applicab		<u> </u>
(Principal office address <u>MUST BE A STREET AI</u>	ODRESS)	
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE B	<u>BOX</u>)	
D. If amending the registered agent and/or regist new registered agent and/or the new registere	tered office address in Florida, enter the name of the ed office address:	
Name of New Registered Agent		
	(Florida strect address)	
V D : 100 111	·	
New Registered Office Address:	. Florida	(Zip Code)
New Registered Agent's Signature, if changing Relatively accept the appointment as registered agent.	egistered Agent: . I am familiar with and accept the obligations of the positi	ion.
	·	
	nature 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.

Example:	יוים	Luku Dan					
X Change	<u>PT</u>	John Doe					
X Remove	\underline{V}	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	GUILHERME PESSOA	5323 Milenia Lakes Blvd Unit 300				
Add			Orlando, FL 32839				
X Remove							
2) Change							
Add							
Remove 3) Change							
Add							
Remove			-				
4) Change		_					
Add							
Remove							
5) Change							
Add							
Remove							
6) Change							
Add							
Remove							

If amending or adding additional Articles, enter change(s) here: (Attach additional sheets, if necessary). (Be specific)	
	
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5 2	
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If an amendment provides for an exchange, reclassification, or cancellation of issued	shares.
provisions for implementing the amendment if not contained in the amendment itsel (if not applicable, indicate N/A)	<u>f:</u>
(у ногаррисаоте, так ше пля)	
	•
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<u> </u>	

The date of each amendment(s) adopt late this document was signed.	ion: <u>+</u>		2022		, if	other than the
Effective date <u>if applicable</u> :	(no m	ore tha	m 90 days after ame	ndment tile date)		
Note: If the date inserted in this block document's effective date on the Depart	does not meet	the ap	oplicable statutory fi	Ž	s date will not be	e listed as the
Adoption of Amendment(s)	(CHECK (<u>ONE</u>)				
☐ The amendment(s) was/were adopted action was not required.	by the incorpe	orators,	or board of director	s without shareholder :	action and sharel	nolder
The amendment(s) was/were adopted by the shareholders was/were suffici	-		The number of vote	s east for the amendme	ent(s)	
selected, by appointed fi	tvoting group the amendment (voting group) 128 28 20 20 20 20 20 20 20 20	entitled (s) was (pp) Other corr – if in fiduci	to vote separately of twere sufficient for a large of the following the hands of a received to the hands of the ha	on the amendment(s):	SLUSE BARÝ ÚF STATE TALLAHASSEE, FLORIC	FILED 2022 MAY -3 PM 2: 15
 -			ted name of person s	igning)		
PT						

(Title of person signing)