P21000080709

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S. PRATHEF

COVER LETTER

TO: Amendment Sec Division of Cor		•	•
	PICART SERVICE		
NAME OF CORPO	PRATION; P21000080709		
DOCUMENT NUM	12100050709 IBER:		
The enclosed Article.	s of Amendment and fee are su	bmitted for filing.	
Please return all corre	espondence concerning this ma	tter to the following:	
	PAVEL A PICART MARTIN	EZ	
		Name of Contact Person	יו
	8970 W FLAGER ST APT 21	Firm/ Company	
	OZZOW TEACHER STATE 21		
	MIAMI FL 33174	Address	
		City/ State and Zip Cod	e
	PAVELPICART@YAHOO.C	OM	
	E-mail address: (to be us	sed for future annual report	notification)
For further information	on concerning this matter, pleas	se call:	
PAVEL A PICART M	IAKTINEZ	786 at (
Name	of Contact Person		de & Daytime Telephone Number
Enclosed is a check f	or the following amount made	payable to the Florida Depa	artment of State:
■ \$35 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)
<u>M</u> 4	niling Address	Street	Address
	nendment Section		lment Section
	vision of Corporations		on of Corporations
	D. Box 6327		entre of Tallahassee
l a	llahassee, FL 32314	2415 i	N. Monroe Street, Suite 810

Tallahassee, FL 32303

Articles of Amendment to Articles of Incorporation of

PICART SERVICES INC			122	
(Name of Corporation as currently filed wi P21000080709	th the Florida Dept. of State)	## 15 15 15 15 15 15 15 15 15 15 15 15 15	AY 2	<u> </u>
(Document Number of Corpora	tion (if known)	1,1,1,1,1,1,1,1,1,1,1,1,1,1,1,1,1,1,1,	6 PH	TI TI
Pursuant to the provisions of section 607.1006, Florida Statutes, this <i>Florida P</i> its Articles of Incorporation:	Profit Corporation adopts the follow	TONION TONION		
A. If amending name, enter the new name of the corporation:		_		
		The	new	
name must be distinguishable and contain the word "corporation," "company, "Inc.," or Co.," or the designation "Corp," "Inc," or "Co". A professi "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 address in Flonew registered agent and/or the new registered office address:	orida, enter the name of the			
Name of New Registered Agent				
Hance of the median feature and the second	-	_		
(Florida street address		_		
New Registered Office Address:	, Florida			
(City)	(Zi _I	r Code)		
New Registered Agent's Signature, if changing Registered Agent: I hereby accept the appointment as registered agent. I am familiar with and a	accept the obligations of the position	L		
Signature of New Registered	Sount if changing	_		
	agom, it 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	<u>PT</u>	John De	<u>)c</u>	
X Remove	$\underline{\mathbf{V}}$	Mike Jo	nes	
X Add	<u>SV</u>	Sally Sr	nith	
Type of Action (Check One)	<u>Title</u>		Name	Address
	V		YULEMA ALVAREZ PENTON	8970 W FLAGLER ST APT 216
1) Change		<u>—</u>		MIAMI, FL 33174
Add				
Remove				
2) Change		_		W
Add				
Remove 3) Change				
		_		
Add				
Remove				
4) Change		_		
Add				
Remove				
5) Change		_		
Add				···
Remove				
6) Change		_		
Add				
Remove				

* DocuSign Envelope ID: A40CFC22-9F8B-4640-8277-F7D64FC792C5

E. If amending or adding additional Articles, enter change(s) here

(Attach	additional sheets, if necessary). (Be specific)
1 	
·	
provi	mendment provides for an exchange, reclassification, or cancellation of issued shares, sions for implementing the amendment if not contained in the amendment itself: f not applicable, indicate N/A)

The date of each amendm date this document was sign	nent(s) adoption:ned.	, if other tha
Effective date if applicable	le:	·
	(no more than 90 days after amendment file date)	
Note: If the date inserted document's effective date of	in this block does not meet the applicable statutory filing requirements, this date on the Department of State's records.	will not be listed a
Adoption of Amendment(s) (<u>CHECK ONE</u>)	
The amendment(s) was/action was not required.	were adopted by the incorporators, or board of directors without shareholder action	and shareholder
	were adopted by the shareholders. The number of votes cast for the amendment(s) s/were sufficient for approval.	
must be separately prov	were approved by the shareholders through voting groups. The following statement vided for each voting group entitled to vote separately on the amendment(s): otes cast for the amendment(s) was/were sufficient for approval	=1
must be separately prov	otes cast for the amendment(s) was/were sufficient for approval	=1
must be separately prov	otes cast for the amendment(s) was/were sufficient for approval	ZOZZ M.
must be separately prov "The number of vo	otes cast for the amendment(s) was/were sufficient for approval	ZOZZ M.
must be separately prov "The number of vo by Dated	otes cast for the amendment(s) was/were sufficient for approval (voting group) 5/16/2022	ZOZZ M.
must be separately prov "The number of vo	otes cast for the amendment(s) was/were sufficient for approval (voting group) 5/16/2022	2022 MAY 26 TALLAHASSEE