Note: Please print this page and use it as a cover sheet. Type the fax audit number (shown below) on the top and bottom of all pages of the document.

(((H21000398005 3)))



Note: DO NOT hit the REFRESH/RELOAD button on your browser from this page. OD Doing so will generate another cover sheet.

To:

Division of Corporations

Fax Number : (850)617-6380

From:

Account Name : AVA FINANCIAL CONSULTANTS INC

Account Number : I20170000094

Phone

: (954)842-1979

Fax Number

: (954)905-4315

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

COR AMND/RESTATE/CORRECT OR O/D RESIGN LAKEVIEW PETRO INC

Certificate of Status	0
Certified Copy	0
Page Count	06
Estimated Charge	\$35.00

OCT 27 2021

A. LUNT

Electronic Filing Menu

Corporate Filing Menu

Help

H210003090051

TO: Amendment Section Division of Corporations

NAME OF CORPORATION: LAKEVIEW PETRO INC	•
DOCUMENT NUMBER: P21000085745	
The enclosed Articles of Amendment and fee are submitted for filing.	
Please return all correspondence concerning this matter to the following	:
SRIBAS DAS	
Name of Contact	Person
LAKEVIEW PETRO INC	
Firm/ Compa	uny
1252 NW 117TH AVE	
Address	
CORAL SPRINGS, FL 33071	
City/ State and Zi	p Code
jrs.sales21@gmail.com	
E-mail address: (to be used for future annual	report notification)
For further information concerning this matter, please call: SRIBAS DAS 954	
Name of Contact Person at ()	889-4593
AL .	ea Code & Daytime Telephone Number
Enclosed is a check for the following amount made payable to the Florida	Department of State:
\$35 Filing Fee \$\begin{align*} \begin{align*} \text{\$\sum \$\text{\$\frac{43.75}\$ Filing Fee & Certified Copy} \\ \text{\$\text{\$\frac{43.75}\$ Filing Fee & Certified Copy} \\ \text{\$\frac{4dditional copy}{\$\text{\$\cong \$\text{\$\cong \$\cong \$\text{\$\cong \$\cong \$\text{\$\cong \$\text{\$\cong \$\cong \$\cong \$\text{\$\cong \$\cong \$\cong \$\cong \$\text{\$\cong \$\cong \$\c	Certificate of Status
Division of Corporations Division of Corporations Division of Corporations Division 6327	treet Address mendment Section ivision of Corporations he Centre of Tallahassee
1 alianassee, FL 32314 24	415 N. Monroe Street, Suite 810 sllahassee, FL 32303

Articles of Amendment

to
Articles of Incorporation
of

H210003980053

3/2

EAREVIEW PETRO INC		
(Name of Corporation as cure	ently filed with the Florida Dept. of State)	100
P21000085745	•	9
(Document Numb	or of Corporation (if known)	
Pursuant to the provisions of section 607.1006, Plorida Statutes, its Articles of Incorporation:	this Florida Profit Corporation adopts the following	ameno
•		
A. If amending name, enter the new name of the corporation	<u>:</u>	
N/A		T L
name must be distinguishable and contain the word "corporation, "Inc.," or Co.," or the designation "Corp," "Inc," or "Co" "chartered," "professional association," or the abbreviation "P	" "company," or "incorporated" or the abbreviation	The 1 1 "Corp the w
B. Enter new principal office address, if applicable:	N/A	
Principal office address MUST BE A STREET ADDRESS)	· .	
·		
Enter new mailing address, if applicable:	N/A	
(Mailing address MAY BE A POST OFFICE BOX)		
		•
Tr.		
If amending the registered agent and/or registered office as new registered agent and/or the new registered office addr	ddress in Florida, enter the name of the	
	1935:	-
Name of New Registered Agent N/A		
	street address)	
New Registered Office Address: N/A	, Florida	
	(City) (Zip Coo	de)
•		
um Danista 3 4 00		
w Registered Agent's Signature, if changing Registered Age ereby accept the appointment as registered agent. I am familia	<u>pt:</u>	
- Tum juntila	r wun and accept the obligations of the position.	
Signature of New	Registered Agent, if changing	•
	33	
eck if applicable		

(Attach additional sheet Please note the officer/a P = President; V = Vice Executive Officer; CFO President, Treasurer, Di Changes should be note.	is, if nece. lirector ti Presiden = Chief I irector wo d in the fo aves the i	tle by the first letter of that; T= Treasurer; S= Serinancial Officer. If an opened be PTD. Collowing manner. Currents of the corporation Salby Smith	cretary; D= Director; TR fficer/director holds more	= Trustee; C = Chairman or Clerk; CEO = than one title, list the first letter of each office the PST and Mike Jones is listed as the V. These should be noted as John Doe, PT as a Ch	held.
X Change	<u>PT</u>	Ighn Doe			
X Remove	<u>v</u> .	Mike Jones			
<u>_X</u> Add	<u>sv</u>	Sally Smith			
Type of Action (Check One)	Title	<u>Name</u>		<u>Address</u>	•
1) Change	VPD	EMAD KHA	N	21744 MARIGOT DR	
X Add				BOCA RATON, FL 33428	
Remove					
2) Change			·		
Add					
Remove Change		· · -			
Add			· ·		
Remove					
4) Change		 			
Add		·			
Remove					
5) Change		<u> </u>			
Add					
Remove					
の Change					
Add		•			

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:

_ Remove

Ά		(Be specific)			5
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The date of each amendment(s) a	OCTOBER 26, 2021	H210003980053	, if other than the
date this document was signed.			-
Effective date if applicable:			6/6
	(no more than 90 days af	ter amendment file date)	
Note: If the date inserted in this I document's effective date on the D	block does not meet the applicable stat	utory filing requirements, this date will	not be listed as the
Adoption of Amendment(s)	(CHECK ONE)		•
The amendment(s) was/were addrection was not required.	opted by the incorporators, or board of o	directors without shareholder action and	shareholder
The amendment(s) was/were add by the shareholders was/were sa	opted by the shareholders. The number afficient for approval.	of votes cast for the amendment(s)	THE FILE PARTY OF CO.
The amendment(s) was/were app must be separately provided for	proved by the shareholders through voting each voting group entitled to vote sepa	ng groups. The following statement rately on the amendment(s):	かのこ
"The number of votes cast	for the amendment(s) was/were sufficient	ent for approval	E STAI
by		**	·
	(voting group)	——————————————————————————————————————	<u>۔</u>
OCTOBER Dated	26, 2021		
Signature 2	Des Des		<u>.</u>
Sciected	rector, president or other officer - if dir l, by an incorporator - if in the hands of ed fiduciary by that fiduciary)	a receiver, trustee, or other court	
	SRIBAS DAS		
•	(Typed or printed name of po	erson signing)	
	PRESIDENT		
•	(Title of person signing)		