P21000086021

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COVER LETTER

TO: Amendment Section
Division of Corporations

NAME OF CORPOR	ATION: CROQUIS ARCHI	TECTS CORP	
DOCUMENT NUMB	ER: P21000086021		
	of Amendment and fee are sui	bmitted for filing.	
Please return all corres	pondence concerning this ma	tter to the following:	
]	LUIS R. SMITH		
-	TAXES USA LLC	Name of Contact Person	1
•	·····	Firm/ Company	<u> </u>
:	5892 STIRLING RD # 4		
-		Address	
1	HOLLYWOOD, FL 33021		
		City/ State and Zip Cod	e
1	INFO@TAXESUSAMIAMI.	СОМ	
-	E-mail address: (to be us	ed for future annual report	notification)
For further information	concerning this matter, pleas	se call: at (305	470-2429
	f Contact Person	at ()de & Daytime Telephone Number
	the following amount made		
\$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)
Ame Divis P.O.	ing Address ndment Section sion of Corporations Box 6327 hassee, FL 32314	Ameno Divisio The C 2415	Address Iment Section on of Corporations entre of Tallahassee N. Monroe Street, Suite 810 assee, FL 32303

'Articles of Amendment to Articles of Incorporation of

CROQUIS ARCHITECTS CO	ĸ	COR	13	UΙ	E	I	п	u	к	А	S	υı	v	v	LΚ
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(Name	of Corporation as curren	tly filed with the Florida Dept. of Stat	<u>e)</u>			
P21000086021						
	(Document Number	of Corporation (if known)				
Pursuant to the provisions of section 607 its Articles of Incorporation:	7.1006, Florida Statutes, this	s Florida Prufit Corporation adopts the	following amendm	ient(s)		
A. If amending name, enter the new r	name of the corporation:		_			
name must be distinguishable and contai "Inc.," or Co.," or the designation " "chartered," "professional association,	Corp," "Inc," or "Co".	A professional corporation name mus				
B. Enter new principal office address.	if anniicable:	455 NE 25TH ST				
(Principal office address MUST BE A.S.		APT 505				
		MIAMI , FL 33137				
C. Enter new mailing address, if appl (Mailing address MAY BE A POST		455 NE 25TH ST				
		APT 505	76			
		MIAMI, FL 33137	22 J			
D. If amending the registered agent an new registered agent and/or the ne			JL -5 Latr			
Name of New Registered Agent	TAXES USA LLC		AM III			
	5892 STIRLING RD # 4			\cup		
	(Florida st	reet address)	10 A			
New Registered Office Address:	HOLLYWOOD	, Florida_	33021			
		(City)	(Zip Code)			
New Registered Agent's Signature, if c	hanging Registered Agent	<u>t:</u>				
hereby accept the appointment as regist			osition.			
				•		
	\	7				
	Signature of New R	legistered Agent, if changing				
Check if applicable						
The amendment(s) is/are being filed p	ursuant 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.

X Change	<u>PT</u>	John Doe	
X Remove	<u>v</u>	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) X Change	P	EDUARDO MATIAS SANCHEZ	455 NE 25TH ST APT 505
Add			MIAMI, FL 33137
Remove 2) X Change	۷P	SILVIA E. VILCA RIOS	455 NE 25TH ST APT 505
2) Change Add			MIAMI, FL 33137
Remove Change			
Add			
Remove 4) Change Add			2022 JUL -
Remove			
5) Change Add			
Remove			
6) Change Add			
Remove			

Attach additional sheets, if necessary	y). (Be specific)				
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the date of each amendment(state this document was signed.) acoption:	, if other than the
Effective date <u>if applicable</u> :		
	(no more than 90 days after amendment file	date)
Note: If the date inserted in thi document's effective date on the	s block does not meet the applicable statutory filing require Department of State's records.	ements, this date will not be listed as the
Adoption of Amendment(s)	(CHECK ONE)	
The amendment(s) was/were a action was not required.	idopted by the incorporators, or board of directors without sh	areholder action and shareholder
The amendment(s) was/were a by the shareholders was/were	dopted by the shareholders. The number of votes cast for the sufficient for approval.	e amendment(s)
mass of separately provides je	pproved by the shareholders through voting groups. The follower each voting group entitled to vote separately on the amendatest for the amendment(s) was/were sufficient for approval (voting group)	lowing statement diment(s): TALLAHASSE
SCICCI	director, president or other officer – if directors or officers had, by an incorporator – if in the hands of a receiver, trustee, atted fiduciary by that fiduciary)	AN II: 26 Ive not been or other court
	EDUARDO MATIAS SANCHEZ	
	(Typed or printed name of person signing)	
	PRESIDENT	
	(Title of person signing)	