## 721000090566

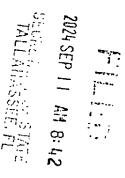
(Requestor's Name)
(Address)
(6.11
(Address)
(City/State/Zip/Phone #)
PICK-UP WAIT MAIL
(Deines Suit News)
(Business Entity Name)
(Document Number)
Certified Copies Certificates of Status
· <del></del>
Special Instructions to Filing Officer

Office Use Only



000436201370

09/11/24--01023--022 \*\*35.00





## **COVER LETTER**

TO: Amendment Section Division of Corporations

NAME OF CORP	ORATION: JUANGO'S TOTA	AL SERVICES CORP		
DOCUMENT NU	MBER: P21000090566			
	les of Amendment and fee are su	ibmitted for filing.		
Please return all con	respondence concerning this ma	tter to the following:		
	Juan Francisco Goncalvez			
		Name of Contact Person	n	
	Juango's Total Services Corp	)		
		Firm/ Company	<del></del>	
	7502 NW 112th Path	,,,,,,,,,,,,,		
		Address		
	Medley, FL 33178			
		City/ State and Zip Code	e	
	juangostotalservicescorp@gr	nail.com		
		sed for future annual report	notification)	
For further informa	tion concerning this matter, pleas	se call:		
Juan Francisco Gor	ncalvez	786	856-3983	
Name of Contact Person		Area Code & Daytime Telephone Number		
Enclosed is a check	for the following amount made	payable to the Florida Depa	artment of State:	
■ \$35 Filing Fee	□\$43.75 Filing Fee & Certificate of Status	S43.75 Filing Fee & Certified Copy (Additional copy is enclosed)	S52.50 Filing Fee Certificate of Status Certified Copy (Additional Copy is enclosed)	
A D P	mendment Section ivision of Corporations O. Box 6327 allahassee, FL 32314	Amend Divisio The Co	Address Iment Section on of Corporations entre of Tallahassee N. Monroe Street, Suite 810	

Tallahassee, FL 32303

## **Articles of Amendment** to Articles of Incorporation

	01
UANGO'S TOTAL SERVICES CORP	F/L/27
(Name of Corporation as curren	ntly filed with the Florida Dept. of State)
21000090566	2024 SEP 11 AM 8: 42
(Document Number	r of Corporation (if known)
	MALLANASSESTATE
ursuant to the provisions of section 607.1006, Florida Statutes, the Articles of Incorporation:	is Pioriaa Projii Corporation adopts the following amendment
·	
. If amending name, enter the new name of the corporation:  /A	
	The new
ime 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.A	A professional corporation name must contain the word
Enter new principal office address, if applicable:	N/A
rincipal office address MUST BE A STREET ADDRESS )	
. Enter new mailing address, if applicable:	
(Mailing address MAY BE A POST OFFICE BOX)	N/A
. If amending the registered agent and/or registered office ad	ldress in Florida, enter the name of the
new registered agent and/or the new registered office addre	<u>255:</u>
Name of New Registered Agent	
(Florida	street address)
Non Boundary Coffee Address N/A	Classide.
New Registered Office Address:	, Florida (City) (Zip Code)
	(City) (Zip Code)
ew Registered Agent's Signature, if changing Registered Age	nt:
erehy accept the appointment as registered agent. I am familia	r wun ana accept the obugations of the position.
	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: X Change	<u>PT</u>	John Do	<u>e</u>	
X Remove	<u>v</u>	Mike Jos	<u>nes</u>	
X Add	<u>sv</u>	Sally Sm	n <u>ith</u>	
Type of Action (Check One)	<u>Title</u>		Name	<u>Addres</u> s
1) Change	V		Monica Arevalo	7502 NW 112th Path
X Add				Medley, FL 33178
Remove				
2) Change		_		
Add				
Remove Change		_		
Add				<del></del>
Remove				-
4) Change		_		
Add				
Remove				· · · · · · · · · · · · · · · · · · ·
5) Change		_		
Add				
Remove				
6) Change		<del></del>		
Add				
Remove				

E. <u>If a</u>	amending or adding additional Articletach additional sheets, if necessary).	<mark>es, enter chang</mark> (Be specific)	e(s) here:			
	iden dudinonar sneets, ij necessary).	(be specific)				
N/A						
					-	
					<del></del>	
				<del></del>	<del>.</del>	
			-			- <del>-</del>
			-	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,		
		<del>-</del>			-	
		<del></del>	<del></del>	<del></del>		
		-				
			<del>.</del>			· · · · · · · · · · · · · · · · · · ·
			,			
F. <u>If a</u>	in amendment provides for an exchan	ge, reclassifica	ition, or cancel	lation of issue	d shares,	
pr	ovisions for implementing the amend	ment if not cor	itained in the a	mendment its	self:	
	(if not applicable, indicate N/A)					
N/A						
				,		
						·
			-			
		<del></del> .				
	-					
_		· · ·				

. .

The date of each amendment(s) adoption:date this document was signed.	, if other than t
Effective date <u>if applicable</u> :	
	no more than 90 days after amendment file date)
Note: If the date inserted in this block does not document's effective date on the Department of S	meet the applicable statutory filing requirements, this date will not be listed as t ate's records.
Adoption of Amendment(s) (CHE	CK ONE)
The amendment(s) was/were adopted by the in action was not required.	corporators, or board of directors without shareholder action and shareholder
☐ The amendment(s) was/were adopted by the sh by the shareholders was/were sufficient for ap	areholders. The number of votes cast for the amendment(s) proval.
	hareholders through voting groups. The following statement coup entitled to vote separately on the amendment(s):
"The number of votes cast for the amend	nent(s) was/were sufficient for approval
by	
by(votin	group)
8/19/2024 Dated	
Signature	
(By a director, preside	nt or other officer – if directors or officers have not been
selected, by an incorp appointed fiduciary b	orator – if in the hands of a receiver, trustee, or other court y that fiduciary)
Juan Francisc	) Goncalvez
	ped or printed name of person signing)
President	

(Title of person signing)