P21000093797

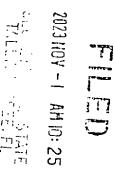
(Requestor's Name)
(Address)
(
(Address)
(City/State/Zip/Phone #)
PICK-UP WAIT MAIL
(Business Entity Name)
(Document Number)
Certified Copies Certificates of Status
Special Instructions to Filing Officer:

Office Use Only



700418286367

11.5./2:==:1625 =00g **\$1.5.



A. BUTLER NOV 1 3 2023

COVER LETTER

TO: Amendment Section Division of Corporations

NAME OF CORPORATION: ILLY SERVICES	CORP			
DOCUMENT NUMBER: P21000093797				
The enclosed Articles of Amendment and fee are su	bmitted for filing.			
Please return all correspondence concerning this ma	tter to the following:			
	llenia Bortoletto			
Name of Contact Person				
ILLY SERVICES CORP				
	Firm/ Company			
25	5 NE 5th Street apt 3914			
	Address			
	Miami-FL 33132			
	City/ State and Zip Code			
n	n/a			
	ed for future annual report notification)			
For further information concerning this matter, pleas				
llenia Bortoletto	at () <u>900-7421</u>			
Name of Contact Person	Area Code & Daytime Telephone Number			
Enclosed is a check for the following amount made p	payable to the Florida Department of State:			
■ \$35 Filing Fee	□\$43.75 Filing Fee & □\$52.50 Filing Fee Certified Copy (Additional copy is enclosed) □\$52.50 Filing Fee Certificate of Status Certified Copy (Additional Copy is enclosed)			
Mailing Address Amendment Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314	Street Address Amendment Section Division of Corporations The Centre of Tallahassee 2415 N. Monroe Street. Suite 810 Tallahassee, Fl. 32303			

Articles of Amendment to Articles of Incorporation of

FILED

	ILLY SERVICES CO	d D		The same of the sa
			2023 2641	F14
(<u>Name</u>	of Corporation as currentl	ly filed with the Florida	Dept. or State)	AH 10: 25
	P21000093797	<u></u>	<u> </u>	
	(Document Number o	of Corporation (if known)	RATE : -	经的价值
rrsuant to the provisions of section 607 Articles of Incorporation:	7.1006, Florida Statutes, this	Florida Profit Corporatio	on adopts the folk	owing amendment(
If amending name, enter the new n	name of the corporation:			
me must be distinguishable and containe.," or Co.," or the designation "chartered." "professional association,	Corp, " "Inc, " or "Co" 2	t professional corporation	nted" or the abbrev on name must co	The new viation "Corp.," ontain the word
Entar now assistant office address	ie amata data.	N/A		
Enter new principal office address, rincipal office address MUST BE A S				
	· ·			
Enter new mailing address, if appl (Mailing address MAY BE A POST		N/A		
If amending the registered agent ar	nd/or registered office addi	ress in Florida, enter the	name of the	
	au magistamad affica address			
new registered agent and/or the ne	w registered office address	<u>:</u>		
new registered agent and/or the ne	Henia Bortoletto	<u>. </u>		
· · · · · · · · · · · · · · · · · · ·	<u> </u>	<u>:</u> 		-
· · · · · · · · · · · · · · · · · · ·	Ilenia Bortoletto			
· · · · · · · · · · · · · · · · · · ·	Ilenia Bortoletto 25 NE 5th Street apt 3914		. Florida ³³¹²	32

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:

 $P = President; \ \hat{V} = Vice\ President; \ T = Treasurer; \ S = Secretary; \ D = Director; \ TR = Trustee; \ C = Chairman or Clerk; \ CEO = Chief Executive Officer; \ CFO = Chief Financial Officer. If an officer/director holds more than one title, list the first letter of each office held. President, Treasurer, Director would be PTD.$

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) Change	VP	Michael C Rivas	25 NE 5th Street apt 3914
Add			Miami-FL 33132
X Remove			
2) Change			
Add			-
Remove 3) Change			
Add			
Remove			
4) Change		 	
Add			
Remove			
5) Change			
Add			
Remove			
6) Change			
Add		-	
Remove			

ne	us, if necessary).	(Be specific)				
				- -		
	 -					
-			 .	 -		
-			 -			
						
			-		-	
	-					
						
	_					
			<u></u>			
	-					

			<u></u>			
м,	·					
		 -				
If an amendment prov	vides for an excha	ange, reclassificati	on, or cancellatio	n of issued shares	<u> </u>	
and the second s	indicate N/4)	tament if not cont	ained in the amer	idment itself:		
provisions for impler	mateure may					
provisions for impler (if not applicable,						
provisions for impler (if not applicable,						
provisions for impler (if not applicable,						
provisions for impler (if not applicable,						
provisions for impler (if not applicable,			-			
provisions for impler (if not applicable,						
provisions for impler (if not applicable,						
provisions for impler (if not applicable,						
provisions for impler (if not applicable,						
 provisions for impler 						
provisions for impler (if not applicable,						

	10/23/2023	
The date of each amendment(s	adoption:	, if other than the
date this document was signed.	0/23/2023	
Effective date if applicable:	0/23/2023	
	(no more than 90 days aft	er amendment file date)
Note: If the date inserted in thi document's effective date on the	s block does not meet the applicable state Department of State's records.	tory filing requirements, this date will not be listed as the
Adoption of Amendment(s)	(<u>CHECK ONE</u>)	
■ The amendment(s) was/were action was not required.	adopted by the incorporators, or board of d	irectors without shareholder action and shareholder
☐ The amendment(s) was/were by the shareholders was/were	adopted by the shareholders. The number sufficient for approval.	of votes cast for the amendment(s)
must be separately provided	approved by the shareholders through voting or each voting group entitled to vote separate for the amendment(s) was/were sufficients.	ately on the amendment(s):
by 100	ist to the amendment(s) was/were surnere	
Dy	(voting group)	·
- · · · · · · · · · · · · · · · · · · ·	Mour.	
selec	director, president or other officer – if dir ted, by an incorporator – if in the hands of inted fiduciary by that fiduciary)	ectors or officers have not been a receiver, trustee, or other court
	Michael C Rivas	
	(Typed or printed name of po	erson signing)
	Vice President	
	(Title of person signing)	



Department of State / Obsision of Corporations / Search Records / Search by Entity Name /

Detail by Entity Name

Florida Profit Corporation ILLY SERVICES CORP

Filing Information

Document Number

P21000093797

FEI/EIN Number

35-2734616

Date Filed

10/29/2021

Effective Date

10/29/2021

State

FL

Status

ACTIVE

Principal Address

25 NE 5TH ST

3914

MIAMI, FL 33132

Changed: 11/09/2022

Mailing Address

25 NE 5TH ST

3914

MIAMI, FL 33132

Changed: 11/09/2022

Registered Agent Name & Address

RIVAS, MICHAEL C 25 NE 5TH ST

3914

MIAMI, FL 33132

Name Changed: 11/09/2022

Address Changed: 11/09/2022

Officer/Director Detail
Name & Address

Title President

BORTOLETTO, ILENIA 25 NE 5TH ST

3914

MIAMI, FL 33132

Title VP