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.

(((H22000094976 3)))



ł220000949763ABC6

To:	
	Division of Corporations
	Fax Number : (850)617-6380
From:	COC HTD
	Account Name : ACCTSMART INC D.B.A. AVILAS ACCOUNTING SERVICES
	Account Number : I20180000072
	Phone : (305)820-3200
	Fax Number : (305)820-2998

2022 MAR 14 PM 1:57 SECREMANCE STATE TALLAHASSEE, FL COR AMND/RESTATE/CORRECT OR O/D RESIGN ILBANIA GOMEZ PA

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## Articles of Amendment to Articles of Incorporation of

ILBANIA GOMEZ PA			
(Name	of Corporation as currently i	filed with the Florida Dept. of	State)
P21000101536			
	(Document Number of C	Corporation (if known)	
Pursuant to the provisions of section 607 its Articles of Incorporation:	.1006, Florida Statutes, this Fl	orida Profit Corporation adopts	the following amendment(s) to
A. If amending name, enter the new n	ame of the corporation:		
ILBANIA GOMEZ SUAREZ PA			The new
name must be distinguishable and contain "Inc.," or Co.," or the designation "Contrartered," "professional association,"	Corp," "Inc," or "Co". A p	mpany," or "incorporated" or th professional corporation name	e abbreviation "Corp.," must contain the word
B. Enter new principal office address,			
(Principal office address MUST BE A S	TREET ADDRESS )		<b>13</b>
			7
C. Enter new mailing address, if appl			至ること
(Mailing address MAY BE A POST	<u>OFFICE BOX</u> )		
			Sp. 3
			775
<b>5.4</b>	12	. The side and the manner of	
D. If amending the registered agent ar new registered agent and/or the new		s in Piorida, enter the name of	tne
	GOMEZ SUAREZ, ILBANI	A	
Name of New Registered Agent			
	(Flarida street	oddeneel	
	(Canada Siree)	uun Casy	
New Registered Office Address:		, Flor	rida (Zip Code)
	(CI	107)	(zip ( tody
New Registered Agent's Signature, if c	hanging Registered Agent:		
I hereby accept the appointment as regist	ered ugent. I am familiar with	h and accept the obligations of the	he position.
<del></del> -			
- Laut	Took		
	Signature of New Regi	stered Agant, if changing	<del></del>
Check if applicable			

H220000949763

☐ 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:

t. Hach additional sheets, if necessary)

Please note the officer director title by the first letter of the office title:

 $P \to President$ ;  $\hat{V} \to Vice President$ ;  $\hat{T} \to Treasurer$ ;  $S \to Secretary$ ,  $D \to Director$ ;  $TR \to Trustee$ ;  $C \to Chairman or Clerk$ ;  $CEO \to Chief$ Executive Officer;  $CFO \to Chief$  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 Doe	
X Remove	<u>Y</u>	Mike Jones	
<u>X</u> Add	<u>sv</u>	Sally Smith	
Type of Action (Check One)	<u>Title</u>	<u>Name</u>	<u>Address</u>
t) X Change	Р	GOMEZ SUAREZ, ILBANIA	
Add			
Remove			
2) Change			
Add			
Remove 3 ) Change			
Add			
Remove			
4) Change			
Add			
Remove			
5) Change			
Add			
Remove			
6) Change		_	
Add			
Remove			

	icles, enter change(s) here: (Be specific)
<del> </del>	
<del></del> -	
f an amendment provides for an excha	ange, reclassification, or cancellation of issued shares,
f an amendment provides for an exchaprovisions for implementing the amet (if not applicable, indicate N/A)	nange, reclassification, or cancellation of issued shares, udment if not contained in the amendment itself:
provisions for implementing the amet	nange, reclassification, or cancellation of issued shares, adment if not contained in the amendment itself:
provisions for implementing the amet	nange, reclassification, or cancellation of issued shares, adment if not contained in the amendment itself:
provisions for implementing the amet	nange, reclassification, or cancellation of issued shares, and ment if not contained in the amendment itself:
provisions for implementing the amet	nange, reclassification, or cancellation of issued shares, and ment if not contained in the amendment itself:
provisions for implementing the amet	nange, reclassification, or cancellation of issued shares, and ment if not contained in the amendment itself:
provisions for implementing the amet	nange, reclassification, or cancellation of issued shares, udment if not contained in the amendment itself:

The date of each amendment(s	s) adoption:	if other than the
date this document was signed.		
Effective date if applicable:		
- <del></del> ""	(no more than 90 days after amendment file date)	
Note: If the date inserted in the document's effective date on the	is block does not meet the applicable statutory filing requirements, this department of State's records.	ate 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 directors without shareholder act	ion and sharcholder
☐ The amendment(s) was/were by the shareholders was/wer	adopted by the shareholders. The number of votes cast for the amendment e sufficient for approval.	(s)
	approved by the shareholders through voting groups. The following statem for each voting group entitled to vote separately on the amendment(s):	en!
"The number of votes of	ast for the amendment(s) was/were sufficient for approval	
bv	."	
,	(voting group)	
03/11/2	022	
Dated		
Signature	e with the	
(By sele	a director, president or other officer – if directors or officers have not been cted, by an incorporator – if in the hands of a receiver, trustee, or other condinted fiduciary by that fiduciary)	
	ILBANIA GOMEZ SUAREZ	
	(Typed or printed name of person signing)	
	PRESIDENT	
	(Title of person signing)	