P22000003912

(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:					
opecial matrictions to 1 ming officer.					
World from					
U					
1/3/24					





000417444340

10/16/23--01026--018 **30.00 01/10/24--01021--001 **13.75

PRINTED PH 5: 19
SEGRE MARY SEE FL

COVER LETTER

TO: Amendment Section Division of Corporations

NAME OF CORPORATION: LOPEZ Mortial Arts Corp
DOCUMENT NUMBER: P 12 00000 3912
The enclosed Articles of Amendment and fee are submitted for filing.
Please return all correspondence concerning this matter to the following:
Emigdio Lopez Name of Contact Person
Name of Contact Person
Lopez Martial Arts Corp Firm/Company
Firm/ Company
15382 9w 23e0 St ≅ €
Address
Miami /FL 33185 = 3 City/ State and Zip Code
City/ State and Zip Code
Address Miami / FL 33185 City/ State and Zip Code E-mail address: (to be used for future annual report notification)
E-mail address: (to be used for future annual report notification)
E-mail address. (to be used for future annual report notification)
For further information concerning this matter, please call:
Emigdio 10Pt2 at (786) 867 4477 Name of Contact Person Area Code & Daytime Telephone Number
Name of Contact Person Area Code & Daytime Telephone Number
Enclosed is a check for the following amount made payable to the Florida Department of State:
☐ \$35 Filing Fee ☐ \$43.75 Filing Fee & ☐ \$43.75 Filing Fee & ☐ \$52.50 Filing Fee Certificate of Status Certified Copy (Additional copy is enclosed) Certified Copy (Additional Copy is enclosed)
Mailing AddressStreet AddressAmendment SectionAmendment SectionDivision of CorporationsDivision of CorporationsP.O. Box 6327The Centre of TallahasseeTallahassee, FL 323142415 N. Monroe Street, Suite 810

Tallahassee, FL 32303

Articles of Amendment to Articles of Incorporation of

1	4 () -		
Lopez Mortial	Arts Corp		
	ently filed with the Florida Dept. of S	<u>tate</u>)	
	0003912		
(Document Numb	er of Corporation (if known)		
Pursuant to the provisions of section 607.1006, Florida Statutes, tits Articles of Incorporation:	this Florida Profit Corporation adopts t	the following amendment(s	s) to
A. If amending name, enter the new name of the corporation	<u>ı:</u>		
	NA	The new	
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	". A professional corporation name n	abbreviation "Corp.,"	
B. Enter new principal office address, if applicable:		£ 283.	
(Principal office address MUST BE A STREET ADDRESS)		23 E T	
		<u> </u>	,
		<u>πήο</u> ω * γ	ē
C. Enter new mailing address, if applicable:			ŋ
(Mailing address MAY BE A POST OFFICE BOX)		mo of	
		一点 9	
D. If amending the registered agent and/or registered office a new registered agent and/or the new registered office add	address in Florida, enter the name of	the	
Name of New Registered Agent			
(Florid	la street address)		
(1 117 44			
New Registered Office Address:	, Flor (City)	ida(<i>Zip Code)</i>	
	(6.9)	() - · · · ·	
New Registered Agent's Signature, if changing Registered Agent's Signature, if changing Registered Agent's Agent's Signature, if changing Registered R	gent:	t	
I hereby accept the appointment as registered agent. I am famil	mar with and accept the obligations of the	ne position.	•
			
Signature of Ne	ew 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	PT	John Doe	
X Remove	V	Mike Jones	
X Add	<u>sv</u>	Sally Smith	
Type of Action (Check One)	<u>Title</u>	Name	<u>Addres</u> s
1) Change	7	Herran D. Muñoz	Address 13252 NW 1 ^{LM} Miami FL 33182
X Add			Miami FL 33182
Remove			TE TI
2) Change			<u>—————————————————————————————————————</u>
Add			
Remove Change			mo on
Add			11: 9
Remove			
4) Change			
Add			
Remove			
5) Change			
Add			
Remove			
6) Change			
Add			
Remove			

ttach additional sheets, if necessary). (Be specific)	
	
	
	2024 SEI
	3 3
	<u> </u>
	- 12 ci
	三三三
	ş · •
an amendment provides for an exchange, reclassification, or cancellation of issued shares,	
provisions for implementing the amendment if not contained in the amendment itself:	
(if not applicable, indicate N/A)	
the number of shere of stock is: 100	
50 sheres for Emigdio Loptz 50 shores for Hernon D. Huroz	
to show for Hernon 12. Herror	

The date of each amendment(s) adoption:date this document was signed.	Nov	20	12023	, if other than the
Effective date if applicable:	o more than 90 c	days after d	umendment file date)	
Note: If the date inserted in this block does not r document's effective date on the Department of Sta		ole statutor	y filing requirement	s, this date will not be listed as the
Adoption of Amendment(s) (CHEC	CK ONE)			
☐ The amendment(s) was/were adopted by the incoaction was not required.	orporators, or bo	ard of dire	ctors without shareho	older action and shareholder
The amendment(s) was/were adopted by the sha by the shareholders was/were sufficient for app	reholders. The r	number of	votes east for the am	endment(s)
☐ The amendment(s) was/were approved by the sh must be separately provided for each voting gro	nareholders throu oup entitled to vo	igh voting ote separat	groups. The followingly on the amendmen	ng statement nt(s):
"The number of votes cast for the amenda	nent(s) was/were	sufficient	for approval	
by	group)	·	· "	2021 JI SECO
DatedNou	20 2013			H-3 PH
Signature (By a director, presider selected, by an incorporate appointed fiduciary by	orator — if in the	r – if direc hands of a	ters or officers have receiver, trustee, or o	not been other court
<u>Г-міб</u> (Ту	Dio La ped or printed na	nne of per	SENT FE	5.5
	ile of person sign			