## P22000016641

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## COVER LETTER

**TO:** Amendment Section Division of Corporations

NAME OF COR	PORATION: KINY MOLINA PA	AVERS & MORE CORP			
DOCUMENT N	UMBER: P22000016641				
	cles of Amendment and fee are sul	omitted for filing.			
Please return all c	orrespondence concerning this mat	tter to the following:			
	KINI MOLINA ALVARADO	)			
	Name of Contact Person				
	KINY MOLINA PAVERS & MORE CORP				
		Firm/ Company			
	304 NW 43RD ST				
		Address			
	DEEFIELD BECH FL 33064				
		City/ State and Zip Code	e		
	KINI7579@GMAIL.COM				
	<del>-</del>	ed for future annual report	notification)		
For further inform	nation concerning this matter, pleas	se call: at (	5333874		
Na	me of Contact Person	Area Co	de & Daytime Telephone Number		
Enclosed is a chec	ck for the following amount made p	payable to the Florida Depa	artment of State:		
■ \$35 Filing Fe	e \$43.75 Filing Fee & Certificate of Status	S43.75 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		Amend Divisio The C	Address Iment Section on of Corporations entre of Tallahassee N. Monroe Street, Suite 810		

Tallahassee, FL 32303

## Articles of Amendment to Articles of Incorporation of

KINY MOLINA PAVERS & MORE CO	ORP			
(Name o	of Corporation as currer	itly filed with the Flo	rida Dept. of State)	
P22000016641				
	(Document Number	of Corporation (if kno	own)	
Pursuant to the provisions of section 607, its Articles of Incorporation:	1006, Florida Statutes, th	is Florida Profit Corp	oration adopts the following	gamendment(s) to
A. If amending name, enter the new m	ame of the corporation:			
· · · · · · · · · · · · · · · · · · ·		**	. <u></u>	The new
name must be distinguishable and contain "Inc.," or Co.," or the designation "C "chartered," "professional association."	Corp," "Inc," or "Co".	A professional corp	rporated" or the abbreviation oration name must contain	n "Corp.," the word
B. Enter new principal office address.	B. Enter new principal office address, if applicable:			207
	(Principal office address MUST BE A STREET ADDRESS)			<del>7</del>
		-	-	<u>&gt; 11</u>
				<u> </u>
C. Enter new mailing address, if appl		NA		₹
(Mailing address <u>MAY BE A POST</u>	OFFICE BOX)			<u>=</u> _O
			,.	•
D. If amending the registered agent ar new registered agent and/or the new			er the name of the	
	CAROLINA CANTIN			
Name of New Registered Agent	936 NE 62ND ST			
		street address)		
	FORT LAUDERDALE	street aaaressi	13334	
New Registered Office Address:	- I ON ENGOENDING	(City)	, Florida(Zip C	
		(Ciù)	(24)	out,
New Registered Agent's Signature, if o				
I hereby accept the appointment as regist	tered agent. I am familia	r with and accept the c	obligations of the position.	
	$\sim$ 1	/)		
	( Mtiu	n		
	Signature of New	Registered Agent, if c	changing	

## Check if applicable

 $\Box$  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; 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	b.L	John Do	<u>oe</u>	
X Remove	<u>V</u>	Mike Jo	nes	
X Add	<u>sv</u>	Sally Sn	<u>nith</u>	
Type of Action (Check One)	<u>Title</u>		Name	<u>Addres</u> s
1) Change	MGR	_	NUBIA FLORES	304 NW 43RD ST
X Add				DEERFIELD BEACH FL 33064
Remove				
2) Change		_		
Add				
Remove 3) Change		_		
Add				
Remove				
4) Change		_		
Add				<del> </del>
Remove				
5) Change		_		
Add				
Remove				
6) Change		-		
Add				
Remove				

ttach additional sheets, if necessary). (Be specific)	
<u> </u>	
	- <sub>- 1</sub> ,
an amendment provides for an exchange, reclassification, or cancellation of issued	shares,
provisions for implementing the amendment if not contained in the amendment itsel	<u>lf:</u>
(if not applicable, indicate N/A)	

The date of each amendment(s) adoption: $0.3/09/2027$	, if other than the
Effective date if applicable:	
(no more than 90 days after amendment file date)	
<b>Note:</b> If the date inserted in this block does not meet the applicable statutory filing requirements, this date wildocument's effective date on the Department of State's records.	Il not be listed as the
Adoption of Amendment(s) ( <u>CHECK ONE</u> )	
The amendment(s) was/were adopted by the incorporators, or board of directors without shareholder action and action was not required.	d shareholder
☐ The amendment(s) was/were adopted by the shareholders. The number of votes east for the amendment(s) by the shareholders was/were sufficient for approval.	
☐ The amendment(s) was/were approved by the shareholders through voting groups. The following statement must be separately provided for each voting group entitled to vote separately on the amendment(s):	
"The number of votes east for the amendment(s) was/were sufficient for approval	
by"  (voting group)	
Dated 03/09/2022	
Signature_	
(By a director, president or other officer – if directors or officers have not been selected, by an incorporator – if in the hands of a receiver, trustee, or other court appointed fiduciary by that fiduciary)	
KINI MOLINA ALVARADO (Typed or printed name of person signing)	<del></del>
(Title of person signing)	
(Title of person signing)	