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Division of Corporations

: (859)617-6389 Fax Number

From:

Account Name : TAX S PRO CORP Account Number : I20200000147 : (786)307-2733

Fax Number : (954)420-7118

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## INFO@TAXSPRO.COM

## COR AMND/RESTATE/CORRECT OR O/D RESIGN . OX VALUATIONS CORP

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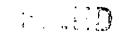
## COVER LETTER

Division of Corpor			
NAME OF CORPORA	TION: OX VALUATIOS C	ORP	
DOCUMENT NUMBE	:R:		
	Amendment and fee are sub	mitted for filing.	
Please return all corresp	ondence concerning this matt	ter to the following:	
A	NWAR I PUELLO		
_	·	Name of Contact Person	
τ	AX S PRO CORP		
_		Firm/ Company	
X	030 PINES BLVD		
_		Address	
5	EMBROKE PINES , FL 330	024	
-		City/ State and Zip Code	<del></del>
ı	NFO@TAXSPRO COM		
-	E-mail address: (to be us	ed for future annual report	notification)
For further information	concerning this matter, pleas	e call:	
ANWAR I PUELLO		at ( <sup>786</sup>	3072733
Name o	f Contact Person	Area Co	de & Daytime Telephone Number
Enclosed is a check for	the following amount made	payable to the Florida Depa	artment of State:
<b>\$35</b> Filing Fee	☐\$43.75 Filing Fee & Certificate of Status	\$43.75 Filing Fee & Certified Copy (Additional copy is enclosed)	☐\$52.50 Filing Fee Certificate of Status Certified Copy (Additional Copy is enclosed)
Ame Divi P.O.	ing Address ndment Section tion of Corporations Box 6327 thassee, FL 32314	Ameno Divisio The C 2415 1	Address Iment Section on of Corporations entre of Tallahassee N. Monroe Street, Suite 810 assee, FL 32303

Check if applicable

[] The amendment(s) is/are being filed pursuant to s. 607.0120 (11) (e), F.S.

## Articles of Amendment to Articles of Incorporation of



2022 JUL 19 PM 12: 53 OX VALUATIONS CORP (Name of Corporation as currently filed with the Florida Dept. of State) P22000030728 (Document Number of Corporation (if known) Pursuant to the provisions of section 607.1006, Florida Statutes, this Florida Profit Corporation adopts the following amendment(s) to its Articles of Incorporation: A. If amending name, enter the new name of the corporation: The new nante must be distinguishable and contain the word "corporation," "company," or "incorporated" or the abbreviation "Corp.," "Inc.," or "Co.," or "festional corporation name must contain the word "chartered," "professional association," or the abbreviation "P.A." 10960 SW 177 TERR B. Enter new principal office address, if applicable; (Principal office address MUST BE A STREET ADDRESS) MIAMI, FL 33157 C. Enter new mailing address, if applicable:
(Melling address MAY REA POST OFFICE BOX) 10960 SW 177 TERR MIAMI, FL 33157 D. If amending the registered agent and/or registered office address in Florida, enter the same of the new recistered agent and/or the new resistered office address: Name of New Registered Agent (Florida street address) New Registered Office Address: \_ \_, Florida\_ (Zio Code) (City) New Registered Agent's Signature, if changing Registered Agent; I hereby accept the appointment as registered agent. I am familiar with and accept the obligations of the position. Signature of New Registered Agent, if changing

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 euch 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, Salty 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	II	John Doc	
X Remaive	¥	Mike Jones	
_X Add	<u>sv</u>	Sally Smith	
Type of Action (Check One)	.Title	Name	Address
1) X Change	P	LOPEZ, OXDIEL	10960 SW 177 TERR
Add	•		MIAMI, FL 33157
Remove			
2) Change		·	
Add			
Remove 3)Change			
Add			
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f an amendment p	rovides for an exc	hange, reclassifi	estion, or cancellati	on of issued share:	Ь
	dementing the ame	endment if not co	ontained in the ame	ndment Itself;	
provisions for imp	ole, indicate N/A)				
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	07/13/2022	
The date of each amendment(s) a date this document was signed.	doption:	, if other than the
Effective date if applicable:		
<u></u>	(no more than 90 days after ameno	lment file date)
Note: If the date inserted in this b document's effective date on the De		ng requirements, this date will not be listed as the
Adoption of Amendment(s)	(CHECK ONE)	
■ The amendment(s) was/were add action was not required.	pxed by the incorporators, or board of directors	Authous shareholder action and shareholder
☐ The amendment(s) was/were add by the shareholders was/were st	pred by the shareholders. The number of votes of flicient for approval.	cast for the smendment(s)
	roved by the shareholders through voting groups each voting group entitled to vote separately on	
"The number of votes cast	for the amendment(s) was/were sufficient for ap	proval
by		<del></del> -
	(voting group)	
07/13/2022 Dated		
Signature		
aclocte	rector, president of part officer – if directors or l, by an incorporator – if in the hands of a received ed fiduciary by that fiduciary)	officers have not been er, hustee, or other court
	OXDIEL LOPEZ	
	(Typed or printed name of person sig	ning)
	PRESIDENT	
	(Title of person signing)	-