P22 0000 35519

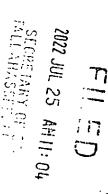
(Re	questor's Name)			
(Ad	dress)			
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PICK-UP	☐ WAIT	MAIL MAIL		
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Certified Copies	_ Certificates	s of Status		
Special Instructions to Filing Officer:				
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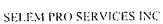


COVER LETTER

TO: Amendment Section Division of Corporations

NAME OF CORPOR	RATION: SELEM PRO SER	VICES INC	
DOCUMENT NUME	P22000035519	<u> </u>	
	of Amendment and fee are sul	bmitted for filing.	
Please return all corres	spondence concerning this mat	tter to the following:	
	Enrique Soto Selen		
		Name of Contact Person	
		Firm/ Company	
	4229 SW 15TH AVE		
	CARE CORAL EL 22014	Address	
	CAPE CORAL, FL 33914	City/ State and Zip Code	
	n concerning this matter, pleas		319-8487
kiki.soto72@gmail.cc	of Contact Person	at (area Co.) 319-8487 de & Daytime Telephone Number
	or the following amount made		
S35 Filing Fee	☐\$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)
Am Div P.O	iling Address endment Section ision of Corporations . Box 6327 ahassee, FL 32314	Amend Division The C 2415 i	Address Iment Section on of Corporations entre of Tallahassee N. Monroe Street, Suite 810 assee, FL 32303

Articles of Amendment to Articles of Incorporation of



Received 1
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(Name o	of Corporation as currently	filed with the Florida Dept. of State)	
	P22000035	519	
	(Document Number of	Corporation (if known)	
Pursuant to the provisions of section 607, its Articles of Incorporation:	1006, Florida Statutes, this F	Florida Profit Corporation adopts the following amendment(s)	to
A. If amending name, enter the new na	ame of the corporation:		
N/A		The _new	
name must be distinguishable and contain "Inc.," or Co.," or the designation "C "chartered," "professional association."	.orp," "Inc," or "Co". A	ompany," or "incorporated" or the abbreviation "Corp.," professional corporation name must contain the word	
B. Enter new principal office address,	if annlicable:	N/A	
(Principal office address <u>MUST BE A STREET ADDRESS</u>)			
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)		N/A	
			
D. If amending the registered agent ar	nd/or registered office address	ess in Florida, enter the name of the	
new registered agent and/or the new	ENRIQUE SOTO SELEN		
Name of New Registered Agent			
	N/A		
	(Florida stre	ret address)	
New Registered Office Address:	N/A	(Circ) Florida (Zip Code)	
	ſ	(City) (Zip Code)	
New Registered Agent's Signature, if o	hanging Registered Agent:		
I hereby accept the appointment as regis.	tered agent. I am familiar w	with and accept the obligations of the position.	
))	

Signature of New 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	<u>PT</u>	<u>John Doc</u>		
X Remove	\underline{V}	Mike Jones		
X Add	<u>sv</u>	Sally Smith		
Type of Action (Check One)	<u>Title</u>	Name		<u>Addres</u> s
1) X Change	P	ENRIQUE SOTO SELE	N	N/A
Add			_	
Remove			_	
2) Change				
Add			-	
Remove 3) Change				
Add			-	
Remove			_	
4) Change				
Add			-	
Remove			_	
5) Change				
Add			-	
Remove			_	
6) Change				
Add			-	
Remove			_	

If amending or (Attach addition)	<mark>adding additio</mark> al sheets, if neco	essary) (Be s	me <u>r changets</u> specific)	<u>r nere</u> .			
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If an amendme	ent provides fo	r an exchange,	<u>reclassificati</u>	on, or cancella	tion of issued s	hares.	
titnot apr	implementing dicable, indicate	<u>the amendme</u> c N/A)	nt it not cont	n <u>neo in the am</u>	ienument usen	<u>'•</u>	
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		<u>.</u>				<u> </u>	
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	4/26/2022	, if other than the
The date of each amendment(s) at date this document was signed.	loption:	, if other than the
Effective date if applicable:		
<u></u>	(no more than 90 days after amendment file date)	
Note: If the date inserted in this b document's effective date on the De	lock does not meet the applicable statutory filing requirements, the partment of State's records.	s date will not be listed as the
Adoption of Amendment(s)	(<u>CHECK ONE</u>)	
The amendment(s) was/were add action was not required.	pted by the incorporators, or board of directors without shareholder	action and shareholder
☐ The amendment(s) was/were add by the shareholders was/were su	pted by the shareholders. The number of votes east for the amenda (flicient for approval.	nent(s)
☐ The amendment(s) was/were app must be separately provided for	roved by the shareholders through voting groups. The following stee each voting group entitled to vote separately on the umendment(s):	itemen t
	for the amendment(s) was/were sufficient for approval	
by	(voting group)	
	(voting group)	
Dated	- Colored .	
Signature	- Co (file)	
selecte	irector, president or other office; if directors or officers have not be do by an incorporator if in the hands of a receiver, trustee, or other ted fiduciary by that fiduciary)	court
	ENRIQUE SOTO SELEN	
	(Typed or printed name of person signing)	
	President	
	(Title of person signing)	