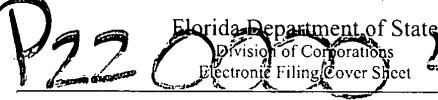
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Division of Corporations



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From:

Account Name : CLAUDIA LIMA TAX & ACCOUNTING LLC

Account Number : I20230000193 Phone : (407)552-7903 Fax Number : (407)449-2348

Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please.

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COR AMND/RESTATE/CORRECT OR O/D RESIGN MATIAS SERVICES HOUSE CORP

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TO: Amendment Section

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COVER LETTER

Division of Corporations NAME OF CORPORATION: MATIAS SERVICES HOUSE CORP DOCUMENT NUMBER: __ The enclosed Articles of Amendment and fee are submitted for filing. Please return all correspondence concerning this matter to the following: IRANDI MATIAS BEZERRA Name of Contact Person Firm/ Company 1289 REGAL KING DR Address KISSIMMEE, FL 34746 City/ State and Zip Code adelmabs664@gmail.com E-mail address: (to be used for future annual report notification) For further information concerning this matter, please call: at (689 2492179

Area Code & Daytime Telephone Number IRANDI MATIAS BEZERRA Name of Contact Person Enclosed is a check for the following amount made payable to the Florida Department of State: S35 Filing Fee ☐\$43.75 Filing Fee & □\$43.75 Filing Fee & □\$52.50 Filing Fee Certificate of Status Certified Copy Certificate of Status (Additional copy is Certified Copy enclosed) (Additional Copy is enclosed) **Mailing Address** Street Address Amendment Section Amendment Section Division of Corporations Division of Corporations The Centre of Tallahassee P.O. Box 6327

2415 N. Monroe Street, Suite 810

Tallahassee, FL 32303

Tallahassee, FL 32314

Articles of Amendment to Articles of Incorporation of

MATIAS SERVICES HOUSE CORP

(Name of Corporation as curren	ntly filed with the Florida Dept. of State)
P22000040048	
(Document Number	of Corporation (if known)
Pursuant to the provisions of section 607.1006, Florida Statutes, thits Articles of Incorporation:	is Florida Profit Corporation adopts the following amendment(s) to
A. If amending name, enter the new name of the corporation:	
	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	A professional corporation name must contain the word
B. Enter new principal office address, if applicable:	<u></u>
(Principal office address <u>MUST BE A STREET ADDRESS</u>)	
	1
C. Enter new mailing address, if applicable:	***
(Mailing address MAY BE A POST OFFICE BOX)	
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	-1
D. If amending the registered agent and/or registered office ad new registered agent and/or the new registered office address Name of New Registered Agent	
(Florida :	street address)
New Registered Office Address:	, Florida
	(City) (Zip Code)
New Registered Agent's Signature, if changing Registered Agen I hereby accept the appointment as registered agent. I am familia.	
Signature of New	Registered Agent, if changing
Ç ,	a marring mirroria
Check if applicable The amendment(s) is/are being filed pursuant to s. 607.0120 (11)	1) (e), F.S.

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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>	John Doe	
X Remove	<u>V</u>	Mike Jones	
X Add	<u>sv</u>	Sally Smith	
Type of Action (Check One)	<u>Title</u>	<u>Name</u>	Address
1) Change	VP	IASMYN SILVA MATIAS	1289 REGAL KING DR
X Add			KISSIMMEE, FL 34746
Remove			
2) Change			
Add			
Remove 3) Change			
Add			
Remove			
4) Change			
Add			
Remove			
5) Change			
Add			
Remove		-	
6) Change			
Add			
Remove			

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The date of each amendment(s) adoption:, if other than the
date this document was signed.
Effective date if applicable:
(no more than 90 days after amendment file date)
Note: If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as the document's effective date on the Department of State's records.
Adoption of Amendment(s) (CHECK ONE)
The amendment(s) was/were adopted by the incorporators, or board of directors without shareholder action and shareholder action was not required.
☐ The amendment(s) was/were adopted by the shareholders. The number of votes cast 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 cast for the amendment(s) was/were sufficient for approval
by"
(voting group)
APRIL 25TH 2024
Dated
Signatur d ranci Matias Bezerra (Apr 26, 2024 13:11 EDT)
(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)
IRANDI MATIAS BEZERRA
(Typed or printed name of person signing)
PRESIDENT
(Title of person signing)

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