P22000046665			
(Requestor's Name) (Address)	600398640406		
(City/State/Zip/Phone #)	12/12/2201010027 **35.00		
(Business Entity Name) (Document Number) Certified Copies Certificates of Status			
Special Instructions to Filing Officer: J DENNIS MAR - 2 2023	SECRETARY OF		
Office Use Only	AM 9:01		

TO: Amendment Section

Division of Corporations

NAME OF CORPORATION: ____

DOCUMENT NUMBER: P22000046665

The enclosed Articles of Amendment and fee are submitted for filing.

Please return all correspondence concerning this matter to the following:

E, ADRIAN MORLANNE

Name of Contact Person E. MORLANNE AND SON ACCOUNTING INC

Firm/ Company

6301 SW 185 WAY

Address

SOUTHWEST RANCHES, FL 33332

City/ State and Zip Code

BADAD@MSN.COM

E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

E. ADRIAN MORLANNE	.786	360-3004
	at (_)
Name of Contact Person	Area Cod	e & Daytime Telephone Number

Enclosed is a check for the following amount made payable to the Florida Department of State:

S35 Filing Fee

S43.75 Filing Fee & Certificate of Status S43.75 Filing Fee & Certified Copy (Additional copy is enclosed) S52.50 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

Street Address

Amendment Section Division of Corporations The Centre of Tallahassee 2415 N. Monroe Street, Suite 810 Tallahassee, FL 32303

Articles of Amendment to Articles of Incorporation of

CROQUETA HOUSE INC

(Name of Corporation as currently filed with the Florida Dept. of State)

P22000046665

(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 name must be distinguishable and contain the word "corporation," "company," or "incorporated" or the abbreviation "Corp.," "Inc.," or Co.," or the designation "Corp," "Inc," or "Co". A professional corporation name must contain the word "chartered," "professional association," or the abbreviation "P.A."

B. Enter new principal office address, if applicable: (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)

D. If amending the registered agent and/or registered office address in Florida, enter the name of the new registered agent and/or the new registered office address:

Name of New Registered Agent	CORALIS LEON	
	4005 4TH AVE	
	(Florida street address)	
<u>New Registered Office Address:</u>	HIALEAH	Florids
	(City)	(Zip Code)

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

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)

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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:**

<u>X</u> Change	<u>PT</u>	John Doe	
X Remove	Y	Mike Jones	
<u>X</u> Add	<u>sv</u>	Sally Smith	
<u>Type of Action</u> (Check One)	<u>Title</u>	Name	Address
1) Change	P 	JUAN A FERNANDEZ	4005 E 4TH AVE
Add			HIALEAH, FL 33010
X Remove			
2) Change	P	CORALIS LEON	4005 E 4TH AVE
XAdd			HIALEAH, FL 33010
Remove			
Add			
Remove			
4) Change		·	
Add			······································
Remove			
5) Change			
Add		~	,
Remove			
6) Change			
Add			
Remove			

If amending or adding additions (Attach additional sheets, if necess	sary). (Be specific)	<u></u>		
(interest management officers, of factors	and the openation			
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If an amendment provides for a	in exchange, reclassific	ation, or cancellation of	issued shares.	
provisions for implementing th (if not applicable, indicate N	te amendment if not co	ontained in the amendm	ent itself:	
(if not applicable, indicate !	V/A)			
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11/14/2022

11/14/2022

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)

11/14/2022 Dated_

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)

CORALIS LEON

(Typed or printed name of person signing)

PRESIDENT

(Title of person signing)