(Re	equestor's Name)	
(Ad	ldress)	<del> </del>
(Ad	ldress)	
(Cit	ty/State/Zip/Phone	e #)
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## COVER LETTER

**TO:** Amendment Section Division of Corporations

NAME OF CORPO	RATION: ADRIAN CARRIE	ER INC	
DOCUMENT NUM	BER: P22000049398		
	s of Amendment and fee are su	bmitted for filing.	
Please return all corre	espondence concerning this ma	itter to the following:	
	ANTONELLA RINALDI RO	DSALES	
		Name of Contact Persor	1
		Firm/ Company	
	2601 NW 16TH ST RD, APT	r 837	
		Address	
	MIAMUFL 33125		
		City/ State and Zip Code	e
	adriancarrierinc@gmail.com		
	E-mail address: (to be us	sed for future annual report	notification)
For further information	on concerning this matter, pleas	se call:	
ANTONELLA RINA	ALDI ROSALES	786	de & Daytime Telephone Number
Name	of Contact Person	Area Co	de & Daytime Telephone Number
Enclosed is a check f	or the following amount made	payable to the Florida Depa	artment of State;
S35 Filing Fee	☐\$43.75 Filing Fee & Certificate of Status	☐\$43.75 Filing Fee & Certified Copy (Additional copy is enclosed)	S52.50 Filing Fee Certificate of Status Certified Copy (Additional Copy is enclosed)
An Div P.C	niling Address nendment Section vision of Corporations D. Box 6327 Ilahassee, FL 32314	Amend Divisio The Co	Address Iment Section on of Corporations entre of Tallahassee N. Monroe Street, Suite 810

Tallahassee, FL 32303

## Articles of Amendment to Articles of Incorporation

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. . . . . . . . . . . . . . .

Check if applicable

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

 $\mathbf{of}$ 

ADRIAN CARRIER INC			
(Name of Corporation as current	tly filed with the Florida Dept. of State)		
P22000049398	2024 JUH - 4 PM 4:31		
(Document Number	of Corporation (if known)		
Pursuant to the provisions of section 607.1006, Florida Statutes, this its Articles of Incorporation:	s Florida Profit Corporation adopts the following amendment(s		
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.	"company," or "incorporated" or the abbreviation "Corp.," A professional corporation name must contain the word		
B. Enter new principal office address, if applicable:	14282 SE 34TH TERRACE		
(Principal office address MUST BE A STREET ADDRESS)	SUMMERFIELD FL 34491		
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)	14282 SE 34TH TERRACE		
inuling duness MAT HEAT OUT OF THE HOLD	SUMMERFIELD FL 34491		
D. If amending the registered agent and/or registered office adenew registered agent and/or the new registered office address	dress in Florida, enter the name of the		
N/A			
Name of New Registered Agent			
(Florida si	treet address)		
New Registered Office Address:			
New Registered Office Address:	. Florida		
New Registered Agent's Signature, if changing Registered Agen I hereby accept the appointment as registered agent. I am familiar	nt: with and accept the obligations of the position.		

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	<u>PT</u>	John Doe	
X Remove	<u>V</u>	Mike Jones	
X Add	<u>sv</u>	Sally Smith	
Type of Action (Check One)	Title	<u>Name</u>	<u>Addres</u> s
1) Change			
Add			
Remove			
2) Change			
Add			
Remove 3 ) Change			
Add			
Remove			
4) Change			
Add			
Remove			
5) Change	_		
Add			<u></u>
Remove			
6) Change			
Add			

. If amending or adding additional Arti (Attach additional sheets, if necessary).	(Be specific)	<del></del>			
VA					
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				<u></u>	
				<u> </u>	
	<del>_</del>			<u>-</u>	
	<u> </u>		<del>_</del>		
		<del></del>	<del></del>		
		<u>.</u>			
					_
If an amendment provides for an exch	ange, reclassificat	ion, or cancellat	<u>jon of issued sha</u>	res,	
provisions for implementing the ame (if not applicable, indicate N/A)	ndment if not cont	ained in the am	endment itself:		
/A					
			<del></del>		

The date of each amendment(s) ad late this document was signed.	option:, if other than t
Effective date if applicable:	
	(no more than 90 days after amendment file date)
<b>Note:</b> If the date inserted in this blocument's effective date on the Dep	ock does not meet the applicable statutory filing requirements, this date will not be listed as to partment of State's records.
Adoption of Amendment(s)	( <u>CHECK ONE</u> )
The amendment(s) was/were adopted action was not required.	oted by the incorporators, or board of directors without shareholder action and shareholder
☐ The amendment(s) was/were adop by the shareholders was/were suf	oted by the shareholders. The number of votes cast for the amendment(s) ficient for approval.
☐ The amendment(s) was/were appromust be separately provided for o	roved by the shareholders through voting groups. The following statement each voting group entitled to vote separately on the amendment(s):
"The number of votes east f	or the amendment(s) was/were sufficient for approval
by	(voting group)
05/28/2024 Dated	
Signature	duankumpaut
selected	rector, president or other officer – if directors or officers have not been , by an incorporator – if in the hands of a receiver, trustee, or other court ed (iduciary by that fiduciary)
,	ADRIAN'S RUMBAUT HERNANDEZ
-	(Typed or printed name of person signing)
i	PRESIDENT

(Title of person signing)