P22000051042

(Requestor's Name)
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COVER LETTER

TO: Amendment Section Division of Corporations

P.O. Box 6327

Tallahassee, FL 32314

NAME OF CORPO	PRATION: Jessica Mondragor	, PA				
DOCUMENT NUM	BER: P22000051042.					
The enclosed Article	s of Amendment and fee are su	bmitted for filing.				
Please return all corr	espondence concerning this ma	tter to the following:				
	Jessica Mondragon			_		
		Name of Contact Person	n			
		Firm/ Company		_		
	9590 Sunset Strip					
		Address		=		
	Sunrise Fl 33322					
		City/ State and Zip Cod	е	-		
	jessica.mondragon.realtor@g	mail.com		SECF TA	2023	
	E-mail address: (to be us	sed for future annual report	notification)	11年11年11年11年11年11年11年11年11年11年11年11年11年	2023 APR 20	1
For further informati	on concerning this matter, plea	se call:		表 5 5 8 8 8 8 8	20 PH 2: 33	
Jessica Mondragon		954 at (821-7883	注 STATI	ώ	
Jessica Mondragon at (954) 821-7883 Name of Contact Person Area Code & Daytime Telephone No.		de & Daytime Telephone Numb	er ATE	ယ ယ		
Enclosed is a check t	for the following amount made	payable to the Florida Depa	artment of State:			
\$35 Filing Fee	S43.75 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)			
Ar	ailing Address nendment Section vision of Corporations	Amend	Address Iment Section on of Corporations			

The Centre of Tallahassee

Tallahassee, FL 32303

2415 N. Monroe Street, Suite 810

Articles of Amendment to Articles of Incorporation of

Jessica Mondragon, PA	
(Name of Corporation as currently	filed with the Florida Dept. of State)
P22000051042.	
(Document Number of	Corporation (if known)
Pursuant to the provisions of section 607.1006, Florida Statutes, this <i>F</i> its Articles of Incorporation:	Ilorida Profit Corporation adopts the following amendment(s) to
A. If amending name, enter the new name of the corporation:	
	The new on
name must be distinguishable and contain the word "corporation," "co". Inc.," or Co.," or the designation "Corp," "Inc," or "Co". A "chartered," "professional association," or the abbreviation "P.A."	ompany," or "incorporated" or the abbreviation "Corpo"
B. Enter new principal office address, if applicable: (Principal office address <u>MUST BE A STREET ADDRESS</u>)	
	PH 2: 33 CF STATE SEE, FL
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: new registered agent and/or the new registered office address:	ess in Florida, enter the name of the
Name of New Registered Agent	
(Florida stre	et address)
New Registered Office Address:	, Fłorida
	City) (Zip Code)
New Registered Agent's Signature, if changing Registered Agent: I hereby accept the appointment as registered agent. I am familiar w	ith and accept the obligations of the position.
Signature of New Re	gistered 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.

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>	<u>Addres</u> s
1) Change	PT	Jessica Mondragon	9590 Sunset Strip Sunrise FI 33322
X Add			(C) Foa
Remove			
2) Change			APR APR
Add			· · · · · · · · · · · · · · · · · · ·
Remove Change			70 PH 2:
Add			FL 83
Remove			
4) Change			
Add			
Remove			
5) Change			
Add			
Remove			
6) Change			
Add			
Remove			

The date of each amendment(s) date this document was signed.	adoption:	, if other than the
-		
Effective date <u>if applicable</u> :	(no more than 90 days after amendment file date)	
Note: If the date inserted in this document's effective date on the	block does not meet the applicable statutory filing requirements, this ded Department of State's records.	ate will not be listed as the
Adoption of Amendment(s)	(<u>CHECK ONE</u>)	
The amendment(s) was/were a action was not required.	dopted by the incorporators, or board of directors without shareholder acti	on and shareholder
☐ The amendment(s) was/were a by the shareholders was/were	dopted by the shareholders. The number of votes cast for the amendment sufficient for approval.	(s)
	approved by the shareholders through voting groups. The following statem for each voting group entitled to vote separately on the amendment(s):	ent
"The number of votes ca	st for the amendment(s) was/were sufficient for approval	
by	*9	
	(voting group)	
4/5/2023 Dated		(S) N3
Signature		2023 APR SECRETI TALLA
(By a selec	director, president or other officer - if directors or officers have not been ted, by an incorporator - if in the hands of a receiver, trustee, or other counted fiduciary by that fiduciary)	n 計20 計
	Jessica Mondragon	OF S
	(Typed or printed name of person signing)	FAT 24
	President	וח
	(Title of person signing)	