P22000059873

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TO: Amendment Section Division of Corporations

NAME OF CORPO	RATION: O. PRIME CORP					
	BER: P22000059873					
The enclosed Articles	of Amendment and fee are su	bmitted for filing.				
Please return all corre	espondence concerning this ma	tter to the following:				
	RÖBERTO MUNOZ ALVA	REZ				
		Name of Contact Person	1			
	O. PRIME CORP					
	_	Firm/ Company				
	15601 SW 137TH AVE APT 25					
		Address				
	MIAMI, FL 33177					
		City/ State and Zip Cod	e			
	ROBTALVAREZ5@ICLOU	ID COM				
	-	sed for future annual report	notification)			
For further information	on concerning this matter, pleas		205-7637			
Name	of Contact Person	Area Co	de & Daytime Telephone Number			
Enclosed is a check for	or the following amount made	payable to the Florida Depa	artment of State:			
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)			
	iling Address		Address			
	endment Section	Amendment Section				
	rision of Corporations 9. Box 6327	Division of Corporations The Centre of Tallahassee				
	lahassee, FL 32314	2415 N. Monroe Street, Suite 810				

Tallahassee, FL 32303

Articles of Amendment to Articles of Incorporation of



Ο.	ρ	R	H	М	F	C	\cap	R)

(<u>Name</u> e	of Corporation as currently filed with the Florida Dept. of Stat	\mathbf{e}) 72.75
P22000059873		e) TALLAHASSÉ
	(Document Number of Corporation (if known)	
Pursuant to the provisions of section 607, its Articles of Incorporation:	1006, Florida Statutes, this <i>Florida Profit Corporation</i> adopts the	following amendment(s) to
A. If amending name, enter the new m	ame of the corporation:	
		The new
name must be distinguishable and contain "Inc.," or Co.," or the designation "C "chartered," "professional association,"	the word "corporation," "company," or "incorporated" or the ab lorp," "Inc," or "Co". A professional corporation name mus or the abbreviation "P.A."	breviation "Corp.," st contain the word
B. Enter new principal office address.	if applicable:	
(Principal office address MUST BE A S		
		
C. Enter new mailing address, if appl (Mailing address <u>MAY BE A POST</u>		
	nd/or registered office address in Florida, enter the name of the	
new registered agent and/or the new		
Name of New Registered Agent	ROBERTO MUNOZ ALVAREZ	
	(Florida street address)	
Variable State and Office of House	15601 SW 137TH AVE APT 25 MIAMI	33177
New Registered Office Address;		(Zip Code)
	\wedge	
New Registered Agent's Signature, if c		•.•
I hereby accept the appointment as regist	tered agent. I am funttian w ith and accept the obligations of the p	osition.
	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)

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 Doc 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>	<u>John De</u>	<u>oe</u>	
X Remove	<u>V</u>	Mike Jo	ones .	
X Add	<u>sv</u>	Sally Si	n <u>ith</u>	
Type of Action (Check One)	Title		<u>Name</u>	<u>Addres</u> s
1) $\frac{X}{2}$ Change	b	_	ROBERTO MUNOZ ALVAREZ	15601 SW 137TH AVE APT 25
Add				MIAMI FL 33177
Remove				
2) Change		_		
Add				
Remove Change		_		
Add				
Remove				
4) Change		_		
Add				
Remove				
51 Change		_		
Add				
Remove				
6) Change		_		
Add				
Remove				

Attach <i>additio</i>	r adding additional Articles, enter change(s) here: nal sheets, if necessary). (Be specific)	
·		
		
-		
	······································	
lf an amendm	ent provides for an exchange, reclassification, or cancellation of issued shares,	
provisions for	r implementing the amendment if not contained in the amendment itself:	
(if not ap	olicable, indicate N A)	

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 a	amendment file date)
Note: If the date inserted in this block does not meet the applicable statutor document's effective date on the Department of State's records.	ry filing requirements, this date will not be listed as the
Adoption of Amendment(s) (CHECK ONE)	
■ The amendment(s) was/were adopted by the incorporators, or board of dire action was not required.	ectors without shareholder action and shareholder
☐ The amendment(s) was/were adopted by the shareholders. The number of by the shareholders was/were sufficient for approval.	votes cast for the amendment(s)
☐ The amendment(s) was/were approved by the shareholders through voting must be separately provided for each voting group entitled to vote separate	groups. The following statement 2.
"The number of votes cast for the amendment(s) was/were sufficient	for approval
ROBERTO MUNOZ ALVAREZ	tor approval SST. PH R: 20
(voting group)	78
08/01/2022 Dated	
Signature (By a director, president or other officer – if direct selected, by an incorporator – if in the hands of a appointed fiduciary by that fiduciary)	
ROBERTO MUNOZ ALVAREZ	
(Typed or printed name of pers	son signing)
PRESIDENT (A)	
(Title of person signing)	