Division of Corporations Electronic Filing Cover Sheet

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To:

Division of Corporations

Fax Number : (850)617-6380

From:

Account Name : EQUIPTRADE AMERICA INC

Account Number : 120230000068 Phone : (954)990-5117 Fax Number : (954)368-2360

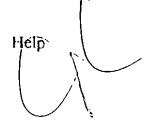
Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please.

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COR AMND/RESTATE/CORRECT OR O/D RESIGN C&C INTEGRAL TESTING SERVICES, CORP

Certificate of Status	0
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Page Count	06
Estimated Charge	\$35.00

Electronic Filing Menu Corporate Filing Menu



COVER LETTER

TO: Amendment Section Division of Corpo				
NAME OF CORPOR	ATION: C&C INTEGRAL	TESTING SERVICES, CO	URP	
DOCUMENT NUMB	FR:P22000064458			
The enclosed Articles of	of Amendment and fee are su	bmitted for filing.		
Please return all corresp	condence concerning this ma	tter to the following:		
-				2
		Name of Contact Perso	n	83
	ROSALBA CARRASQUEL			音道 書
_	Firm/ Company			
	HC FINANCIAL SERVICES INC			表 2
-		Address		
	SUNRISE, FLORIDA,33351			2023 AUG 24 AM 9: 34 SEGRELLANY SEEL FL
-		City/ State and Zip Cod	ť	_ - 연절 : 3
	hefinancialservicesfl@gmail.	com		
-	E-mail address: (to be us	sed for future annual report	notification)	
For further information	concerning this matter, please	se call:		
ROSALBA CARRAS	QUEL	954 at (6255177	
Name of Contact Person			de & Daytime Telephone Num	her
Enclosed is a check for	the following amount made	payable to the Florida Dep	artment of State:	
S35 Filing Fee	☐ \$43.75 Filing Fee & Certificate of Status	Cis43.75 Filing Fee & Certified Copy (Additional copy is enclosed)	☐S52.50 Filing Fee Certificate of Status Certified Copy (Additional Copy is enclosed)	
Ame Divis P.O.	ing Address ndment Section sion of Corporations Box 6327 hassee, FL 32314	Amen Division The C 2415	Address dment Section on of Corporations Centre of Tallahassee N. Monroe Street, Suite 810	

The amendment(s) is/are being filed pursuant to s. 607,0120 (11) (e), F.S.

to

Articles of Amendment to Articles of Incorporation of

C&C INTEGRAL TESTING SERVICES, CORP		
	ently filed with the Florida Dept. of State)	
P22000064458		
(Document Numb	er of Corporation (if known)	
Pursuant to the provisions of section 607.1006, Florida Statutes, tits Articles of Incorporation:	this Florida Profit Corporation adopts the following amer	ndment(
A. If amending name, enter the new name of the corporation	<u>u</u>	
	The	пен
nume 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	"company," or "incorporated" or the abbreviation . A professional corporation name must confain the	rp word
chartered. projessional association, of the above viation 1	A."	5 ,
3. Unter new principal office address, if applicable:		<u>ა</u> _ [
Principal office address <u>MUST BE A STREET ADDRESS</u>)	7.4	- :
	en n'	? - '
	$\underline{}$	_م
	m:	 ယ
Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)	to the second se	£
(Manuag undress MAT BE AT WIT OF FICE 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 add	ress:	
Name of New Registered Agent		
Hame of New Regimered Agent		
(Florid	la street address)	
New Registered Office Address:	, Florida	
	(City) (Zip Code)	
lew Registered Agent's Signature, if changing Registered Ag	gent:	
hereby accept the appointment as registered agent. I am famil	liar with and accept the obligations of the position.	
Signature of Ne	ow Registered Agent, if changing	
Check if applicable		

Example:

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 afficer/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 Doc	
X Remove	<u>Y</u>	Mike Jones	
X Add	<u>\$V</u>	Sally Smith	
Type of Action (Check One)	Title	<u>Name</u>	Address
1) Change	P 	CARLOS J PALADINES ROSSERC	8515 SUNRISE LAKES BLV
Add			APTO 109 50 50 50 50 50 50 50 50 50 50 50 50 50
X Remove			
2) X Change	P	MARIA CATALINA,GOMEZ	8515 SUNRISE LAKES BLVD
Add			APTO 109 77 2 3
Remove 3) Change			SUNRISE, FL 33322
Add			
Remove			
4) Change			
Add			
Remove			
5) Change			
Add			
Remove			
6) Change			
Add			
Remove			

Attach additional sheets, if necessary).	(Be specific)	
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f an amendment provides for an excl	nange, reclassification, or cancellation of issued shares,	
provisions for implementing the see	ndment if not contained in the amendment itself:	
(if not applicable, indicate N/4)		
(if not applicable, indicate N/A)		
(if not applicable, indicate N/A)	· · · · · · · · · · · · · · · · · · ·	
(if not applicable, indicate N/A)		
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(if not applicable, indicate N/A)		
(if not applicable, indicate N/A)		
(if not applicable, indicate N/A)		
(if not applicable, indicate N/A)		

The date of each amendment(s) a date this document was signed.	doption:	, if other than the
_		
Effective date if applicable:	(no more than 90 days after amendment file dat	e)
Note: If the date inserted in this document's effective date on the E	block does not meet the applicable statutory filing requirement partment of State's records.	nts, this date will not be listed as the
Adoption of Amendment(s)	(CHECK ONE)	
action was not required.	opted by the incorporators, or board of directors without share	cholder action and shareholder
■ The amendment(s) was/were ac by the shareholders was/were s	lopted by the shareholders. The number of votes east for the a sufficient for approval.	mendment(s) 77
☐ The amendment(s) was/were ap must be separately provided for	proved by the shareholders through voting groups. The follow reach voting group entitled to vote separately on the amendm	ent(s): SSO =
"The number of votes cas	t for the amendment(s) was/were sufficient for approval	9: 32 F.F.
·// 	(voting group)	r.
08-23-202 Dated	23	
Signature		
select	director, president or other officer - if directors or officers haved, by an incorporator - if in the hands of a receiver, trustee, onted fiduciary by that fiduciary)	re not been rether court
	CARLOS JOSE, PALADINES ROSSERO	
	(Typed or printed name of person signing)	
	PRESIDENTE	
	(Title of person signing)	