P22000094115

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SECRETARY OF STATE
STALL AND STATE



COVER LETTER

TO: Amendment Section Division of Corporations

NAME OF CORP	ORATION: FIS SERVICES C	ORP			
DOCUMENT NU	022000004115				
The enclosed Articl	les of Amendment and fee are su	bmitted for filing.			
Please return all con	rrespondence concerning this ma	itter to the following:			
	DOUBRONT CORRALES,	CARLOS L			
	Name of Contact Person			_	
		Firm/ Company		_	
8200 NW 41TH STREET, STE 200					
		Address		_	
	DORAL, FL 33166				
		City/ State and Zip Cod	e		
	Cdoubront87@gmail.com				
	E-mail address: (to be us	sed for future annual report	notification)		
For further information	tion concerning this matter, pleas	se call:			
CARLOS L DOUB	BRONT	at (⁷⁸⁶	779-8154	<i>(</i> 2)	287
Nam	ne of Contact Person	Area Co	de & Daytime Telephone Numb	CRE	- 33 - 34
Enclosed is a check	for the following amount made	payable to the Florida Dep	artment of State:		2823 MAY 30
S35 Filing Fee	☐S43.75 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)	TAR (OF STATE LANKASSEE, FL	PH 2: 30
A D P.	Mailing Address mendment Section ivision of Corporations O. Box 6327 allahassee, FL 32314	Amend Division The C 2415 f	Address Iment Section on of Corporations entre of Tallahassee N. Monroe Street, Suite 810		

15 MW 3U 5M 5:

Articles of Amendment to Articles of Incorporation of

FIS SERVICES CORP		
	tly filed with the Florida Dept. of State)	
P22000094115		
(Document Number of	of Corporation (if known)	
Pursuant to the provisions of section 607.1006, Florida Statutes, this its Articles of Incorporation:	Florida Profit Corporation adopts the following amendment(s) to	
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.	A professional corporation name must contain the word	
B. Enter new principal office address, if applicable:	3625 NW 82nd AVE, STE 100	
(Principal office address <u>MUST BE A STREET ADDRESS</u>)	DORAL, FL 33166	
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)	3625 NW 82nd AVE, STE 100	
	DORAL, FL 33166	
	(/) r-2 rn «3	
D. If amending the registered agent and/or registered office add new registered agent and/or the new registered office address		
Name of New Registered Agent	30 PH 2	
	PM 2	
(Florida st	(Florida street address) [For ida street address] [For ida street address]	
New Registered Office Address:	, Florida	
	(City) (Zip Code)	
New Registered Agent's Signature, if changing Registered Agent I hereby accept the appointment as registered agent. I am familiar	<u>t:</u> with and accept the obligations of the position.	
Signature of New K	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)

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: X Change	<u>PT</u>	John Doe	
X Remove	<u>V</u>	Mike Jones	
X Add	<u>sv</u>	Satly Smith	
Type of Action (Check One)	<u>Title</u>	<u>Name</u>	Address
1) X Change	P	DOUBRONT C, CARLOS L	3625 NW 82nd AVE, STE 100
Add			DORAL, FL 33166
Remove			
2) Change			
Add			
Remove Change			
Add			
Remove			© 2023 EF 2323
4) Change			2021 MAY 30 PM 2: SECRE ACC OF ST TALLAHA: SEE
Add			30 17/20
Remove			
5) Change	- 1.0		<u>ై స్</u> లు
Add			H 0
Remove			
6) Change	+**		
Add			
Remove			

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TI 1	05/19/2023	
The date of each amendment(s) late this document was signed.	adoption:,	if other than the
0.5	/19/2023	
Effective date <u>if applicable</u> :	(1.0 - 1.0 -	
	(no more than 90 days after amendment file date)	
Note: If the date inserted in this document's effective date on the I	block does not meet the applicable statutory filing requirements, this date will no Department of State's records.	t 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 action and sha	reholder
☐ The amendment(s) was/were as by the shareholders was/were	dopted by the shareholders. The number of votes east for the amendment(s) sufficient for approval.	
☐ The amendment(s) was/were a must be separately provided for	oproved by the shareholders through voting groups. The following statement or each voting group entitled to vote separately on the amendment(s):	
"The number of votes cas	st for the amendment(s) was/were sufficient for approval	
by		
	(voting group)	
selçct	director, president or other officer – if directors or officers have not been ed, by an incorporator – if in the hands of a receiver, trustee, or other court need fiduciary by that fiduciary) DOUBRONT CORRALES, CARLOS L	
	(Typed or printed name of person signing)	
	PRESIDENT	
	(Title of person signing)	FILED 2023 MAY 30 PH 2: 30 SECRETARY OF STATE