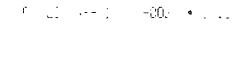
P23000004393

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COVER LETTER

TO: Amendment Section Division of Corporations

NAME OF COR	RPORATION: REYES FAMILY	ABA SERVICES INC	
DOCUMENT N	P23000004303		
The enclosed Ari	icles of Amendment and fee are su	ibmitted for filing.	
Please return all	correspondence concerning this ma	atter to the following:	
	MARIELYS REYES RODR	IGUEZ	
		Name of Contact Person	n
	REYES FAMILY ABA SER	VICES INC	
		Firm/ Company	· · · · · · · · · · · · · · · · · · ·
	16136 SW 147 ST		
	· · · · · · · · · · · · · · · · · · ·	Address	
	MIAMI, FL 33196		
		City/ State and Zip Cod	e
	RIJAI@MSN.COM		
	E-mail address: (to be us	sed for future annual report	notification)
	nation concerning this matter, plea	se call:	755-2053
N	ame of Contact Person		de & Daytime Telephone Number
Enclosed is a che	ck for the following amount made	payable to the Florida Depa	artment of State:
S35 Filing Fo	ee	S43.75 Filing Fee & Certified Copy (Additional copy is enclosed)	☐S52.50 Filing Fee Certificate of Status Certified Copy (Additional Copy is enclosed)
Mailing Address Amendment Section Division of Corporations P.O. Box 6327 Tallahassee, 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 of

REYES FAMILY ABA SERVICES INC.

KETES FAMILY ABA SERVICES INC		
(Name of Corporation as curr	ently filed with the Fl	orida Dept. of State)
P23000004393		
(Document Numb	er of Corporation (if k	nown)
Pursuant to the provisions of section 607.1006, Florida Statutes, its Articles of Incorporation:	this <i>Florida Profit Cor</i>	poration adopts the following amendment(s)
A. If amending name, enter the new name of the corporation	1:	
N/A	_	
name must he distinguishable and contain the word "corporation "Inc.," or Co.," or the designation "Corp," "Inc," or "Co" "chartered," "professional association," or the abbreviation "F	'. A professional cor	Thenew prporated" or the abbreviation "Corp.," poration name must contain the word
B. Enter new principal office address, if applicable: (Principal office address MUST BE A STREET ADDRESS)	N/A	2024 S= C
, and the state of		SE TO
E. Enter new mailing address, if applicable:	N/A	
(Mailing address MAY BE A POST OFFICE BOX)		
	 	5 6
). If amending the registered agent and/or registered office :	address in Florida, en	ter the name of the
new registered agent and/or the new registered office add	ress:	to the name of the
Name of New Registered Agent N/A		
(Florid	a street address)	
New Registered Office Address:	(City)	, Florida
	телу	(гар Соце)
New Registered Agent's Signature, if changing Registered Reg	ent:	
hereby accept the appointment as registered agent. I am famili	ar with and accept the	obligations of the position.
Signature of Ne	w Registered Agent, if a	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 Doc	
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	VP	EUDDY BORREGO	16136 SW 147 ST
X Add			MIAMI, FL 33196
Remove			
2) Change			
Add			
Remove 3) Change			
Add			
Remove			
4) Change			
Add			
Remove			
5) Change			
Add			
Remove			
6) Change			
Add			
Remove			

fritte	nending or adding additional Articles, enter change(s) here: th additional sheets, if necessary). (Be specific)
/Α	
	
lf an	amendment provides for an exchange, reclassification, or cancellation of issued shares,
pro	visions for implementing the amendment if not contained in the amendment itself:
	(if not applicable, indicate N/A)
A	

	09/16/2024	
The date of each amend	dment(s) adoption:	, if other than the
date this document was s	signed. 09/16/2024	
Effective date if applica	able:	
	(no more than 90 days after amendment file date)	
	ed in this block does not meet the applicable statutory filing requirements, to on the Department of State's records.	his date will not be listed as the
Adoption of Amendme	nt(s) (<u>CHECK ONE</u>)	
■ The amendment(s) was action was not require	as/were adopted by the incorporators, or board of directors without shareholded.	er action and shareholder
	as/were adopted by the shareholders. The number of votes cast for the amend was/were sufficient for approval.	ment(s)
	as/were approved by the shareholders through voting groups. The following s rovided for each voting group entitled to vote separately on the amendment(s,	
"The number of	f votes cast for the amendment(s) was/were sufficient for approval	
bv	••	
,	(voting group)	
	09/16/2024	
Signat	ure Mayor	
	(By a director, president or other officer – if directors or officers have not selected, by an incorporator – if in the hands of a receiver, trustee, or othe appointed fiduciary by that fiduciary)	been r court
	MARIELYS REYES RODRIGUEZ	
	(Typed or printed name of person signing)	
	PRESIDENT	
	(Title of person signing)	