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COVER LETTER

TO: Amendment Section Division of Corporations

NAME OF CORPOR	AATION:		
DOCUMENT NUME	P23000006068		<u> </u>
The enclosed Articles	of Amendment and fee are su	bmitted for filing.	
Please return all corres	pondence concerning this ma	tter to the following:	
	ALEXANDRA LOZANO		
		Name of Contact Person	
		Firm/ Company	
	8305 W ATLANTIC BLVD		
		Address	
	CORAL SPRINGS, FL 330)71	
		City/ State and Zip Code	
	maxi8317@aol.com		
	E-mail address: (to be us	sed for future annual report	notification)
For further information	n concerning this matter, plea	se call:	
ALEXANDRA LOZA		954	224-2348
Name o	of Contact Person	at (at Coc	le & Daytime Telephone Number
Enclosed is a check fo	r the following amount made	payable to the Florida Depa	rtment of State:
S35 Filing Fee	☐\$43.75 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)
Mailing Address Amendment Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314		Amend Division The Co 2415 N	Address ment Section n of Corporations entre of Tallahassee I. Monroe Street, Suite 810 ssee, FL 32303

Articles of Amendment to Articles of Incorporation

JAD TEX CORP	7073 FER 20 DH 1.5
(Name of Corporation as currently f	iled with the Florida Dept. of State)
P23000006068	-
(Document Number of C	orporation (if known)
Pursuant to the provisions of section 607.1006, Florida Statutes, this <i>Flor</i> its Articles of Incorporation:	rida 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," "con "Inc.," or Co.," or the designation "Corp," "Inc," or "Co". A p "chartered," "professional association," or the abbreviation "P.A."	npany," or "incorporated" or the abbreviation "Corp.,"
B. Enter new principal office address, if applicable: (Principal office address <u>MUST BE A STREET ADDRESS</u>)	
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:	in Florida, enter the name of the
Name of New Registered Agent	
(Florida street	addrass)
17 107 tab Sirver	uuu usy
New Registered Office Address: (Ci	ty) /Zip Code)
New Registered Agent's Signature, if changing Registered Agent: Thereby accept the appointment as registered agent. I am familiar with	and accept the obligations of the position.

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 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> 14</u>	John Do	<u>pe</u>	
X Remove	<u>V</u>	Mike Jo	ones .	
X Add	<u>sv</u>	Sally Sr	nith	
Type of Action (Check One)	<u>Title</u>		<u>Name</u>	<u>Addres</u> s
1) Change	VP	_	TEXEIRA FERRERAS CUMANA	6910 HOPE ST
X Add				HOLLYWOOD, FL 33024
Remove				
2) Change				
Add				
Remove 3) Change		_		
Add				
Remove				
4) Change		_		
Add				
Remove				
5) Change		_		
Add				
Remove				
6) Change		_		
Add				
Remove				

. <u>If am</u> e	nding or add	ing additional	Articles, e	nter change	<u>e(s) here</u> :				
(Attacl	r additional sh	ling additional heets, if necessa	ry). (Be s	pecific)					
									
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orov	isions for imp	rovides for an elementing the	amendmer	reciassinca it if not cor	tained in t	he amendr	<u>i issueu sna</u> ent itself:	165,	
(if not applicab	ble, indicate N/.	1)						
									
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		_							
									<u> </u>

The date of each amendment(s date this document was signed.	s) 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 the document's effective date on the	is block does not meet the applicable statutory filing requirements. e Department of State's records.	this date will not be listed as the
Adoption of Amendment(s)	(CHECK_ONE)	
The amendment(s) was/were action was not required.	adopted by the incorporators, or board of directors without sharehol	der action and shareholder
☐ The amendment(s) was/were by the shareholders was/wer	adopted by the shareholders. The number of votes cast for the amere sufficient for approval.	ndment(s)
	approved by the shareholders through voting groups. The following for each voting group entitled to vote separately on the amendment	
"The number of votes of	east for the amendment(s) was/were sufficient for approval	
by	(voting group)	
	(voting group)	
Dated	02.10.23 Jose Cumanos	
Signature	Jose Cumana.	
(By sele	a director, president or other officer – if directors or officers have no ected, by an incorporator – if in the hands of a receiver, trustee, or ot ointed fiduciary by that fiduciary)	
	JOSE FELIX CUMANA DIAZ	
	(Typed or printed name of person signing)	
	PRESIDENT	
	(Title of person signing)	