P2300007663

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COVER LETTER

TO: Amendment Section Division of Corporations

NAME OF CORPOR	RATION: AME BELIZE TI	TLE AND ESCROW INC	
DOCUMENT NUMI	BER: P23000007663		
	of Amendment and fee are su	bmitted for tiling.	
Please return all corres	spondence concerning this ma	tter to the following:	
	MARCO FLORES		
		Name of Contact Person)
	PRESTIGE FINANCIAL AI	OVISORS INC	
		Firm/ Company	
	6935 NW 179TH ST APT 10)1	
		Address	.
	HIALEAH FL 33015		
		City/ State and Zip Cod	2
	INFO@PFAFLORIDA.COM	1	
	-	sed for future annual report	notification)
For further informatio	n concerning this matter, plea	se call:	
MARCO FLORES		at (786	384-3437
Name o	of Contact Person		de & Daytime Telephone Number
Enclosed is a check fo	r the following amount made	payable to the Florida Depa	artment of State:
■ \$35 Filing Fee	□\$43.75 Filing Fee & Certificate of Status	□\$43.75 Filing Fee & Certified Copy (Additional copy is enclosed)	S52.50 Filing Fee Certificate of Status Certified Copy (Additional Copy is enclosed)
And Divi P.O.	ling Address endment Section sion of Corporations Box 6327 ahassee, FL 32314	Amend Divisio The C	Address Iment Section on of Corporations entre of Tallahassee V. Monroe Street, Suite 810

Tallahassee, FL 32303

Articles of Amendment to Articles of Incorporation of

AME BELIZE TITLE AND ESCROW INC

223000007663		ate)
(Document Number of C	Corporation (if known)	
ursuant to the provisions of section 607.1006, Florida Statutes, this Fl s Articles of Incorporation:	lorida Profit Corporation adopts t	ne following amendment(s)
AME TITLE AND ESCROW INC		The new
ame must be distinguishable and contain the word "corporation," "co Inc.," or Co.," or the designation "Corp," "Inc," or "Co", A chartered," "professional association," or the abbreviation "P.A."		
B. <u>Enter new principal office address, if applicable:</u> 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)		(h2°,)
If amending the registered agent and/or registered office address: new registered agent and/or the new registered office address:	ss in Florida, enter the name of t	he
Name of New Registered Agent		
(Florida stree	address)	
New Registered Office Address:	. Flori	da
Sen Registered Office Statutess.	Tity)	(Zip Code)

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>PT</u>	John Do	<u>ıe</u>	
X Remove	<u>V</u>	Mike Jo	nes	
X Add	<u>sv</u>	Sally Sn	nith	
Type of Action (Check One)	<u>Title</u>		Name	<u>Addres</u> s
1) Change		_		
Add				
Remove				
2) Change		_		
Add				
Remove 3) Change		_		
Add				
Remove				
4) Change		_		
Add				
Remove				
51 Change		_		
Add				
Remove				
6) Change		_	<u> </u>	
Add				
Remove				

	ing additional Art wets, if necessary).	(Be specific)				
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f an amendment pi	rovides for an exc	hange, reclassific	eation, or cancel	lation of issued	I shares,	
provisio <u>ns for imp</u> l	lementing the ame	endment if not co	ontained in the a	mendment itse	elf:	
(if not applicab	le, indicate N/A)					
<u>-</u>				· <u> </u>		· -
			<u> </u>			
				-		
		<u> </u>			<u> </u>	
		<u></u> .				

late this document was signed.	
Effective date <u>if applicable</u> :	(no more than 90 days after amendment file date)
	(no more than 90 days after amendment file date)
Note: If the date inserted in this blocument's effective date on the De	ock does not meet the applicable statutory filing requirements, this date will not be listed as the partment of State's records.
Adoption of Amendment(s)	(<u>CHECK ONE</u>)
The amendment(s) was/were ado action was not required.	pted by the incorporators, or board of directors without shareholder action and shareholder
☐ The amendment(s) was/were ado by the shareholders was/were su	pted by the shareholders. The number of votes cast for the amendment(s) fficient for approval.
	roved by the shareholders through voting groups. The following statement each voting group entitled to vote separately on the amendment(s):
"The number of votes cast:	for the amendment(s) was/were sufficient for approval
by	,
	(voting group)
06/26/23 Dated	
Signature	
selected	rector, president or other officer – if directors or officers have not been I, by an incorporator – if in the hands of a receiver, trustee, or other court ed fiduciary by that fiduciary)
	MISAEL FLORES JR
	(Typed or printed name of person signing)
	PRESIDENT

(Title of person signing)