P23000012017

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COVER LETTER

TO: Amendment Section Division of Corporations

NAME OF CORPORA	ATION: 11970 PROPERT	Y. INC	
DOCUMENT NUMBI	ER: P23000012017		
	f Amendment and fee are su	bmitted for filing.	
Please return all corresp	ondence concerning this ma	tter to the following:	
	. LEONA	RDO LUIS	
_	•	Name of Contact Person	1
	11970 PF	ROPERTY, INC	
_		Firm/ Company	
	50 NW 1	•	
_		Address	++-
	MIAMI,	FL 33182	
_		City/ State and Zip Cod	е
For further information	E-mail address: (to be us	ed for future annual report se call:	notification)
LEONA	ARDO LUIS	at (_)
Name of	Contact Person	Area Co	de & Daytime Telephone Number
Enclosed is a check for	the following amount made	payable to the Florida Depa	artment of State:
S35 Filing Fee	☐\$43.75 Filing Fee & Certificate of Status	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



FILED

(<u>Name</u>	of Corporation as currently	filed with the Florida Dept. of State)23 Pri 1:05
	P23000012017	
###	(Document Number of	Corporation (if known)
Pursuant to the provisions of section 607 its Articles of Incorporation:	.1006, Florida Statutes, this I	Florida Profit Corporation adopts the following amendment(s) to
A. If amending name, enter the new n	ame of the corporation:	
name must be distinguishable and contain "Inc.," or Co.," or the designation "C "chartered," "professional association,"	Corp." "Inc," or "Co". A	The new ompany," or "incorporated" or the abbreviation "Corp.," professional corporation name must contain the word
, ,		50 NW 130 AVE., MIAMI, FL 33182
B. Enter new principal office address, if applicable: (Principal office address MUST BE A STREET ADDRESS)		-
C. Enter new mailing address, if appl (Mailing address MAY BE A POST		50 NW 130 AVE., MIAMI, FL 33182
D. If amending the registered agent an new registered agent and/or the ne		
Name of New Registered Agent	LEONARDO LUIS	
	50 NW 130 AVE	
	(Florida stre	et address)
New Registered Office Address:	MIAMI	, Florida_33182
	(City) (Zip Code)
New Registered Agent's Signature, if c I hereby accept the appointment as regist	tered agent. I am familiar w	ith and accept the obligations of the position.
	Signature of New Re	gistered 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	$\overline{\text{pT}}$	John Doe	
X Remove	$\underline{\mathbf{V}}$	Mike Jones	
X Add	<u>sv</u>	Sally Smith	
Type of Action (Check One)	Title	<u>Name</u>	<u>Addres</u> s
I) Change	Р	YOSNIER LUIS	15245 SW 8th WAY
Add X Remove			MIAMI, FL 33194
Remove 2) Change	P	LEONARDO LUIS	50 NW 130 AVE.,
X Add			MIAMI, FL 33182
Remove 3) Change			
Add			
Remove 4) Change			
Add			
Remove 5) Change			
Add			
Remove			
6) Change			<u> </u>
Add			
Remove			

	. (Be specific)			
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f an amendment provides for an exc	hange, reclassificat	ion, or cancellatio	n of issued shares	2
neargeione for implementing the am	endment ii not com	anica in the anich	different itself.	
provisions for implementing the am (if not applicable, indicate N/A)				
(if not applicable, indicate N/A)				
(if not applicable, indicate N/A)				
provisions for implementing the am (if not applicable, indicate N/A)				
if not applicable, indicate N/A)				
if not applicable, indicate N/A)				
if not applicable, indicate N/A)				
provisions for implementing the am (if not applicable, indicate N/A)				
(if not applicable, indicate N/A)				
if not applicable, indicate N/A)				

The date of each amendment(s) addate this document was signed.	ption:, if other than t
Effective date <u>if applicable</u> :	(no more than 90 days after amendment file date)
	(no more than 50 days after amenament file date)
Note: If the date inserted in this blo document's effective date on the Dep	ck does not meet the applicable statutory filing requirements, this date will not be listed as tartment of State's records.
Adoption of Amendment(s)	(<u>CHECK ONE</u>)
The amendment(s) was/were adopt action was not required.	ed by the incorporators, or board of directors without shareholder action and shareholder
☐ The amendment(s) was/were adop by the shareholders was/were suf	ted by the shareholders. The number of votes cast for the amendment(s) icient for approval.
	oved by the shareholders through voting groups. The following statement ach voting group entitled to vote separately on the amendment(s):
"The number of votes cast for	r the amendment(s) was/were sufficient for approval
by	
	(voting group)
Dated	2-19-2024 ctol president or other officer – if directors or officers have not been
selected,	by an ineorporator – if in the hands of a receiver, trustee, or other court fiduciary by that fiduciary)
_	(Typed or printed name of person signing)
_	
	President
_	(Title of person signing)