

P2300021457

Florida Department of State
Division of Corporations
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To: Division of Corporations
Fax Number : (850)617-6380

From: Account Name : TAP SOLUTIONS INC
Account Number : I20210000103
Phone : (786)615-3057
Fax Number : (786)615-3058

****Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please.****

Email Address: info@tapsolution.net

**COR AMND/RESTATE/CORRECT OR O/D RESIGN
BLANDON OROZCO COMMERCIAL CORP.**

| | |
|-----------------------|---------|
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FLORIDA DEPARTMENT OF STATE
DIVISION OF CORPORATIONS



May 5, 2023

FLORIDA DEPARTMENT OF STATE
Division of Corporations

THREE BEARS SOLUTIONS INC.
936 INTRACOASTAL DRIVE
APT 8B
FORT LAUDERDALE, FL 33304US

SUBJECT: THREE BEARS SOLUTIONS INC.
REF: P16000005336

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We received your electronically transmitted document. However, the document has not been filed. Please make the following corrections and refax the complete document, including the electronic filing cover sheet.

The document submitted does not meet legibility requirements for electronic filing. Please do not attempt to refax this document until the quality has been improved.

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Tammi Cline FAX Aud. #: H23000168934
Regulatory Specialist II Supervisor Letter Number: 323A00010226

Articles of Amendment
to
Articles of Incorporation
of

BLANDON OROZCO COMMERCIAL CORP

(Name of Corporation as currently filed with the Florida Dept. of State)

P23000021457

(Document Number of Corporation (if known))

Pursuant to the provisions of section 607.1006, Florida Statutes, this *Florida Profit Corporation* adopts the following amendment(s) to its Articles of Incorporation:

A. If amending name, enter the new name of the corporation:

The new name must be distinguishable and contain the word "corporation," "company," or "incorporated" or the abbreviation "Corp.," "Inc.," or "Co.," or the designation "Corp.," "Inc.," or "Co." A professional corporation name must contain the word "chartered," "professional association," or the abbreviation "P.A."

B. Enter new principal office address, if applicable:
(Principal office address MUST BE A STREET ADDRESS)

29379 W MITCHELL AVE

BUCKEYE, AZ 853967161

C. Enter new mailing address, if applicable:
(Mailing address MAY BE A POST OFFICE BOX)

29379 W MITCHELL AVE

BUCKEYE, AZ 853967161

D. If amending the registered agent and/or registered office address in Florida, enter the name of the new registered agent and/or the new registered office address:

Name of New Registered Agent TAP SOLUTION INC

2343 NW 7TH ST

(Florida street address)

New Registered Office Address: MIAMI, Florida 33125
(City) (Zip Code)

New Registered Agent's Signature, if changing Registered Agent:

I hereby 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.

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TALLAHASSEE, FL

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:

☒ Change PT John Doe
☒ Remove V Mike Jones
☒ Add SV Sally Smith

| Type of Action (Check One) | Title | Name | Address |
|--|-------|-------------------------|---|
| 1) <input type="checkbox"/> Change <input checked="" type="checkbox"/> Add <input type="checkbox"/> Remove | VP | LUYV OROZCO COULSON | 29379 W MITCHELL AVE BUCKEYE, AZ 853967161 |
| 2) <input type="checkbox"/> Change <input type="checkbox"/> Add <input checked="" type="checkbox"/> Remove | P | SERGIO A BLANDON GARCIA | 12140 NW 20TH AVENUE MIAMI, FL 33167 |
| 3) <input type="checkbox"/> Change <input type="checkbox"/> Add <input checked="" type="checkbox"/> Remove | MNG | MARIA G BLANDON OROZCO | 12140 NW 20TH AVENUE MIAMI, FL 33167 |
| 4) <input type="checkbox"/> Change <input checked="" type="checkbox"/> Add <input type="checkbox"/> Remove | P | SERGIO A BLANDON GARCIA | 29379 W MITCHELL AVE BUCKEYE, AZ 853967161 |
| 5) <input type="checkbox"/> Change <input checked="" type="checkbox"/> Add <input type="checkbox"/> Remove | MNG | MARIA G BLANDON OROZCO | 29379 W MITCHELL AVE BUCKEYE, AZ 853967161 |
| 6) <input type="checkbox"/> Change <input type="checkbox"/> Add <input type="checkbox"/> Remove | | | |

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 TALLAHASSEE
 CLERK OF THE COURT

E. If amending or adding additional Articles, enter change(s) here:
(Attach additional sheets, if necessary). (Be specific)

ADD EIN: 92-3948442

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TALLAHASSEE, FL

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F. If an amendment provides for an exchange, reclassification, or cancellation of issued shares,
provisions for implementing the amendment if not contained in the amendment itself:
(if not applicable, indicate N/A)

The date of each amendment(s) adoption: _____, if other than the date this document was signed.

Effective date if applicable: _____
(no more than 90 days after amendment file date)

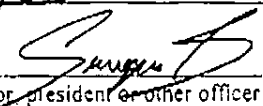
Note: If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as the document's effective date on the Department of State's records.

Adoption of Amendment(s) (CHECK ONE)

- ☐ The amendment(s) was/were adopted by the incorporators, or board of directors without shareholder action and shareholder action was not required.
- ☐ The amendment(s) was/were adopted by the shareholders. The number of votes cast for the amendment(s) by the shareholders was/were sufficient for approval.
- ☒ The amendment(s) was/were approved by the shareholders through voting groups. The following statement must be separately provided for 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)

Dated 05/09/23

Signature 
(By a director, president or other officer -- if directors or officers have not been selected, by an incorporator -- if in the hands of a receiver, trustee, or other court appointed fiduciary by that fiduciary)

Sergio Blandon
(Typed or printed name of person signing)

PRESIDENT
(Title of person signing)

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