## P23000048643

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## **COVER LETTER**

**TO:** Amendment Section Division of Corporations

NAME OF CORPO	ORATION: COTOCABLE IN	C	
	IBER:		
	s of Amendment and fee are su	ibmitted for filing.	
Please return all corr	espondence concerning this ma	atter to the following:	
	FRANCISCO R CASTELLA	NOS	
	<u> </u>	Name of Contact Person	n
	COTOCABLE INC		
		Firm/ Company	
	10314 CHADBOURNE DR		
	<u> </u>	Address	
	TAMPA FL 33624		
	<u> </u>	City/ State and Zip Cod	e
	SERVICIOSLATINOCORP	FL@HOTMAIL.COM	
		sed for future annual report	notification)
For further informati	on concerning this matter, pleas	se call:	
FRANCISCO R CA	STELLANOS	at ( 813	1884-4411
Name	of Contact Person	Area Coo	de & Daytime Telephone Number
Enclosed is a check f	or the following amount made		
■ \$35 Filing Fee	☐\$43.75 Filing Fee & Certificate of Status	S43.75 Filing Fee & Certified Copy (Additional copy is enclosed)	☐\$52.50 Filing Fee Certificate of Status Certified Copy (Additional Copy is enclosed)
Am Div P.C	illing Address lendment Section vision of Corporations b. Box 6327 lahassee, FL 32314	Amend Divisio The Co 2415 N	Address ment Section n of Corporations entre of Tallahassee 4. Monroe Street, Suite 810 ssee, FL 32303

## Articles of Amendment to Articles of Incorporation of

			<u> </u>	
	to		<0 <sub>7</sub>	tate)
	Articles of Inc	•	• ,	
	-			
COTOCABLE INC				
(Name e	of Corporation as current	ly filed with the Fl	orida Dept. of St	tate)
P2;	3000048643			
	(Document Number o	of Corporation (if kr	nown)	
Pursuant to the provisions of section 607. ts Articles of Incorporation:	1006. Florida Statutes, this	Florida Profit Cor <sub>l</sub>	poration adopts t	he following amendment(s
A. If amending name, enter the new n	ame of the corporation:			
N/A				The new
iame must be distinguishable and contain 'Inc.,'' or Co.,'' or the designation "C 'chartered,'' "professional association,'	lorp," "Inc," or "Co", a	4 professional corp	poration name n	ust contain the word
Futer new principal office address	if applicables	N/A		
		N/A		
3. Enter new principal office address, Principal office address <u>MUST BE A S</u>		N/A		
		N/A 		
		N/A		
Principal office address <u>MUST BE A S</u> L. Enter new mailing address, if appli	TREET ADDRESS )			
Principal office address <u>MUST BE A S</u>	TREET ADDRESS )	N/A N/A		
Principal office address <u>MUST BE A S</u> L. Enter new mailing address, if appli	TREET ADDRESS )			
Principal office address MUST BE A S  L. Enter new mailing address, if appli	TREET ADDRESS )			
Principal office address <u>MUST BE A S</u> L. Enter new mailing address, if appli	TREET ADDRESS )			
Principal office address <u>MUST BE A S</u> Enter new mailing address, if appli (Mailing address <u>MAY BE A POST</u> )	TREET ADDRESS ) icable: OFFICE BOX)	N/A		
Principal office address <u>MUST BE A S</u> L. Enter new mailing address, if appli (Mailing address <u>MAY BE A POST</u> )	TREET ADDRESS ) icable: OFFICE BOX) id/or registered office add	N/A ress in Florida, en	er the name of t	he
Principal office address <u>MUST BE A S</u> Enter new mailing address, if appli (Mailing address <u>MAY BE A POST</u> )  If amending the registered agent an new registered agent and/or the new	TREET ADDRESS )  icable: OFFICE BOX)  id/or registered office address w registered office address	N/A  ress in Florida, end	er the name of t	he
Principal office address <u>MUST BE A S</u> Enter new mailing address, if appli (Mailing address <u>MAY BE A POST</u> )	TREET ADDRESS ) icable: OFFICE BOX) id/or registered office add	N/A  ress in Florida, end	er the name of t	he
Principal office address <u>MUST BE A S</u> Enter new mailing address, if appli (Mailing address <u>MAY BE A POST</u> )  If amending the registered agent an new registered agent and/or the new	TREET ADDRESS )  icable: OFFICE BOX)  id/or registered office address w registered office address	N/A  ress in Florida, end	<u>-</u>	he
Principal office address <u>MUST BE A S</u> C. Enter new mailing address, if appli (Mailing address <u>MAY BE A POST</u> )  D. If amending the registered agent an new registered agent and/or the new	icable: OFFICE BOX)  id/or registered office address registered office address FRANCISCO R CASTEL  10314 CHADBOURNE D	N/A  ress in Florida, end	<u>-</u>	he
Principal office address <u>MUST BE A S</u> C. Enter new mailing address, if appli (Mailing address <u>MAY BE A POST</u> )  D. If amending the registered agent an new registered agent and/or the new	icable: OFFICE BOX)  id/or registered office address registered office address FRANCISCO R CASTEL  10314 CHADBOURNE D	N/A  ress in Florida, ent LANOS R TAMPA FL 336:	<u>-</u>	

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.

Francise R. Cartellanos

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)

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: XChange	<u>PT</u>	John Doe		
X Remove	<u>V</u>	Mike Jones		
X_ Add	<u>sv</u>	Sally Smith		
Type of Action (Check One)	<u>Title</u>	<u>Name</u>	Address	
1) X Change	P	FRANCISCO R CASTELLANOS	10314 CHADBOURNE DR	
Add			TAMPA FL 33624	
Remove				
2) Change	· <del>-</del>			
Add				
Remove 3) Change	~~~			
Add			·	
Remove				
4) Change		_	-	
Add				
Remove				
5) Change		_		
Add				
Remove				
6) Change				
Add				
Remove				

E. If amending or adding additional Articles, enter change(s) here: (Attach additional sheets, if necessary). (Be specific)
THE PRESIDENT AND REGISTER AGENT'S NAME SHOULD BE FRANCISCO R CASTELLANOS
· - ·
1. 144 · 14 · 144
<del></del>
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)
N/A
······································

	07/01/2023	
The date of each amendment(s)	adoption:	, if other than the
date this document was signed.		
	7/01/2023	
Effective date <u>if applicable</u> :	(no more th	an 90 days after amendment file date)
Note: If the date inserted in this document's effective date on the I		pplicable statutory filing requirements, this date will not be listed as the ds.
Adoption of Amendment(s)	( <u>CHECK ONE</u> )	
The amendment(s) was/were a action was not required.	dopted by the incorporators	or board of directors without shareholder action and shareholder
☐ The amendment(s) was/were a by the shareholders was/were		The number of votes cast for the amendment(s)
		s through voting groups. The following statement d to vote separately on the amendment(s):
"The number of votes car	st for the amendment(s) was	s/were sufficient for approval
by		
	(voting group)	
11/28/201	23	
Dated	<del></del>	/
Signature	Francisco	R. Catellanos
(Ву а		officer - if directors or officers have not been
		n the hands of a receiver, trustee, or other court
appoi	inted fiduciary by that fiduc	iary)
	FRANSCISCO R CAST	ELLANOS
	(Typed or prin	ted name of person signing)
	PRESIDENT	
	(Title of perso	n signing)