P23000050945

(Reque	stor's Name)	
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(City/S	ate/Zip/Phone #)	
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PICK-UP	WAIT	MAIL
(Busine	ess Entity Name)	
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A. BUTLER DEC - 4 2023

COVER LETTER

TO: Amendment Section Division of Corporations

NAME OF CORPOR	ATION: GUZMAN FINAN	CIAL SERVICES CORP	
DOCUMENT NUMB	ER: P23000050945		
The enclosed Articles of	f Amendment and fee are sui	bmitted for filing.	
Please return all corresp	ondence concerning this ma	tter to the following:	
1	LEYLA M GUZMAN		
-		Name of Contact Person	
(GUZMAN TAX & ACCOUNTING SERVICES CORP		
-		Firm/ Company	
<u>:</u>	3270 GOLDEN GATE PARI	CWAY SUITE 103	
-		Address	
ì	NAPLES FL 34116		
-		City/ State and Zip Code	:
(office@guzmantaxes.net		
-	E-mail address: (to be us	sed for future annual report	notification)
For further information	concerning this matter, pleas		
LEYLA M GUZMAN		at () 645-2346 le & Daytime Telephone Number
Name o	f Contact Person	Area Coo	le & Daytime Telephone Number
Enclosed is a check for	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)
Amer Divis P.O.	ing Address indiment Section ion of Corporations Box 6327 hassee, FL 32314	Amend Divisio The Co 2415 N	Address ment Section n of Corporations entre of Tallahassee J. Monroe Street, Suite 810 ssee, FL 32303

Articles of Amendment to Articles of Incorporation of

GUZMAN FINANIAL SERVICES CORP

FILED

(Name of Corporation	on as currently filed with the	Florida Dent. of State)
P23000050945		2023 HOY -9 AH 11: 35
(Docum	ent Number of Corporation (if	
Pursuant to the provisions of section 607,1006, Florida its Articles of Incorporation:	Statutes, this Florida Profit C	
A. If amending name, enter the new name of the co	rporation:	
GUZMAN TAX & ACCOUNTING SERVICES COR	P	The new
name must be distinguishable and contain the word "co "Inc.," or Co.," or the designation "Corp," "Inc," "chartered," "professional association," or the abbrev	' or "Co". A professional c	incorporated" or the abbreviation "Corp.,"
B. Enter new principal office address, if applicable: (Principal office address MUST BE A STREET ADD		
C. Enter new mailing address, if applicable:		
(Mailing address MAY BE A POST OFFICE BO)	Ψ	
D. If amending the registered agent and/or register		, enter the name of the
new registered agent and/or the new registered of	omce address:	
Name of New Registered Agent		
	(Florida street address)	
New Registered Office Address:		, Florida
	(City)	(Zip Code)
New Registered Agent's Signature, if changing Regil I hereby accept the appointment as registered agent.		the obligations of the position.
C1	trong of Nove Descript and Life are	if alconoling
Signa	tture of New Registered Agent,	, ij changing
Check if applicable		

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.

X Change	<u>PT</u>	John Doe	
X Remove	<u>V</u>	Mike Jones	
<u>X</u> Add	<u>sv</u>	Sally Smith	
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			
5) Change			
Add			
Remove			
6) Change			
Add			
Remove			

amending or adding additional Arti ttach additional sheets, if necessary).	(Be specific)	
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an amendment provides for an exch	ange, reclassification, or cancellation of issued shares, ndment if not contained in the amendment itself:	
(if not applicable, indicate N/A)	numerical not contained in the amendment itself.	
		_
		_
		_

•	07/07/2023	
The date of each amendment(s) ad	option:	, if other than the
date this document was signed.	7/2023	
Effective date <u>if applicable</u> :	72023	
	(no more than 90 days after amendment file date)	
Note: If the date inserted in this bl- document's effective date on the Dep	ock does not meet the applicable statutory filing requirements, this coartment of State's records.	date will not be listed as the
Adoption of Amendment(s)	(<u>CHECK ONE</u>)	
■ The amendment(s) was/were adoption was not required.	oted by the incorporators, or board of directors without shareholder ac	tion and shareholder
☐ The amendment(s) was/were adop by the shareholders was/were suf	pted by the shareholders. The number of votes cast for the amendmen ficient for approval.	u(s)
	roved by the shareholders through voting groups. The following states each voting group entitled to vote separately on the amendment(s):	ment
"The number of votes cast t	or the amendment(s) was/were sufficient for approval	
PRESIDENT	,	
by	(voting group)	
11/03/2023		
Dated		
a: F		
Signature/	rector, president or other officer - if directors or officers have not been	
	, by an incorporator – if in the hands of a receiver, trustee, or other co	
	ed fiduciary by that fiduciary)	
	10.116 50000	
_	(Typed or printed name of person signing)	
	(1 About of brinten name of person signing)	
	tresident	

(Title of person signing)