## P23000051903

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## **COVER LETTER**

**TO:** Amendment Section Division of Corporations

NAME OF CORPO	PRATION: Corporate Busines.	s Partners, Inc.				
DOCUMENT NUM	IBER: P23000051903		<del></del> .			
	s of Amendment and fee are su	bmitted for filing.				
Please return all corr	espondence concerning this ma	tter to the following:				
	Gabriela Garcia					
	-	Name of Contact Persor	1			
	Corporate Business Partners Inc.					
		Firm/ Company				
	13900 SW 73 Ave Address					
Miami, FL 33158						
		City/ State and Zip Cod				
	garcigabym@yahoo.com					
		sed for future annual report	notification)			
For further informati	on concerning this matter, pleas	se call:				
Gabriela Garcia		at (_786	302-7866			
Name	of Contact Person	Area Co	de & Daytime Telephone Number			
Enclosed is a check t	or the following amount made	payable to the Florida Depa	artment of State:			
S35 Filing Fee	S43.75 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		Street Address Amendment Section Division of Corporations The Centre of Tallahassee				
Ta	llahassee, FL 32314	2415 N. Monroe Street, Suite 810				

Tallahassee, FL 32303

## Articles of Amendment to Articles of Incorporation of



Corporate Business Partners, Inc. (Name of Corporation as currently filed with the Florida Dept. of State) P23000051903 (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: Not Applicable 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." Not Applicable B. Enter new principal office address, if applicable: (Principal office address MUST BE A STREET ADDRESS) C. Enter new mailing address, if applicable: Not Applicable (Mailing address MAY BE A POST OFFICE BOX) 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: Not Applicable Name of New Registered Agent (Florida street address) \_, Florida\_ New Registered Office Address: (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.

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				
_X Add	<u>\$V</u>	Sally Smith				
Type of Action (Check One)	<u>Title</u>	<u>Name</u>	<u>Addres</u> s			
1) X Change	<u>P</u>	Alejandro A Monje Lopez				
Add						
Remove						
2) Change						
Add						
Remove 3 ) Change						
Add						
Remove						
4) Change						
Add						
Remove						
5) Change						
Add	<del></del> _					
Remove						
6) Change						
Add						
Remove						

. <u>If amending or adding</u> (Attach <i>additional shee</i>	additional Articles s, if necessary). (	s <mark>, enter change(s</mark> Be specific)	s) here:			
lot Applicable						
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provisions for imple	menting the amend	ment if not cont	ained in the am	endment itself:	11 C.S.	
(if not applicable	e, indicate N/A)					
lot Applicable						
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The date of each amendment(s) adoption:	if other than
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 statutor document's effective date on the Department of State's records.	ry filing requirements, this date will not be listed as
Adoption of Amendment(s) ( <u>CHECK ONE</u> )	
The amendment(s) was/were adopted by the incorporators, or board of dire action was not required.	ctors without shareholder action and shareholder
☐ The amendment(s) was/were adopted by the shareholders. The number of by the shareholders was/were sufficient for approval.	votes cast for the amendment(s)
☐ The amendment(s) was/were approved by the shareholders through voting must be separately provided for each voting group entitled to vote separate	
"The number of votes cast for the amendment(s) was/were sufficient	tor approval
by	
(voting group)	
08-06-2023	
Dated	
Signature FAW	
(By a director, president or other officer – if direct selected, by an incorporator – if in the hands of a appointed fiduciary by that fiduciary)	
Alejandro A Monje Lopez	
(Typed or printed name of pers	on signing)
President	
(Title of person signing)	

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