P13 000052773

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COVER LETTER

TO: Amendment Section Division of Corporations

NAME OF CORPO	RATION: NOEBENY SERV	TICES INC	
	BER: P23000052773		
The enclosed Articles	s of Amendment and fee are su	bmitted for filing.	
Please return all corre	espondence concerning this ma	atter to the following:	
	GARCIA, NOEVIA A		
	Name of Contact Person		
	NOEBENY SERVICES INC		
	Firm/ Company		
	5701 NW 32 AVE		
		Address	
	MIAMI, FL 33142		
		City/ State and Zip Code	
benitog1956@gmail.com			
		sed for future annual report notification)	
For further information	on concerning this matter, plea	se call:	27128 AUG
GARCIA, NOEVIA	Α	786 350-8164	
Name	of Contact Person	Area Code & Daytime Telephone Number	- - -
Enclosed is a check f	or the following amount made	payable to the Florida Department of State:	77
S35 Filing Fee	☐\$43.75 Filing Fee & Certificate of Status	S43.75 Filing Fee & S52.50 Filing Fee Certified Copy (Additional copy is enclosed) S52.50 Filing Fee Certifieate of Status Certified Copy (Additional Copy is enclosed)	TAKE CARE
An Div P.C	niling Address nendment Section vision of Corporations D. Box 6327 lahassee, FL 32314	Street Address Amendment Section Division of Corporations The Centre of Tallahassee 2415 N. Monroe Street, Suite 810 Tallahassee, FL 32303	

Articles of Amendment to Articles of Incorporation of

to

NOEBENY SERVICES INC

NOEBENT SERVICES INC			
(Name of Corporation as currently	filed with the Florida Dept. of State)		
P23000052773			
(Document Number of	Corporation (if known)		
Pursuant to the provisions of section 607,1006, Florida Statutes, this I its Articles of Incorporation:	Torida Profit Corporation adopts the followi	ng amendm	ent(s)
A. If amending name, enter the new name of the corporation:			
name must be distinguishable and contain the word "corporation," "co". Inc.," or Co.," or the designation "Corp," "Inc," or "Co". A "chartered," "professional association," or the abbreviation "P.A."			
B. Enter new principal office address, if applicable: (Principal office address <u>MUST BE A STREET ADDRESS</u>)			
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)			
D. If amending the registered agent and/or registered office addr new registered agent and/or the new registered office address:		- 10 T	2023
Name of New Registered Agent			2023 AUG 14
(Florida stre	ert address)	_	
			=======================================
New Registered Office Address:	, Florida Ciry) ————————————————————————————————————	Code)	Fil 12: 59
New Registered Agent's Signature, if changing Registered Agent: I hereby accept the appointment as registered agent. I am familiar w	rith and accept the obligations of the position.		
Signature of New Re	gistered Agent, if changing	_	

Check if applicable

 \square 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)

Remove

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: X Change	<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) Change Add	<u>P</u>	BENITO A GARCIA	5701 NW 32 AVE MIAMI, FL 33142
X Remove 2)	<u>P</u>	NOEVIA A GARCIA	5701 NW 32 AVE MIAMI FL 32 AVE
Remove 3) Change			
Add Remove 4) Change			Silling Aug the transfer of th
Add Remove			FA12: 59
5) Change Add Remove			
6) Change Add			

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attach additional sheets, if necessar	ry). (Be specific)	
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an amendment provides for an	exchange, reclassification, or cancellation of amendment if not contained in the amendme	issued shares,
(if not applicable, indicate N/s	i)	m reserr
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The date of each amendment(s) adoption:	8/9/2023	, if other than the
date this document was signed. Effective date if applicable:	8/9/2023	
	(no more than 90 days after amendment fit	le date)
Note: If the date inserted in this block does n document's effective date on the Department of		rements, this date will not be listed as the
Adoption of Amendment(s) (CF	IECK ONE)	
X The amendment(s) was/were adopted by the action was not required.	incorporators, or board of directors without	shareholder action and shareholder
☐ The amendment(s) was/were adopted by the by the shareholders was/were sulficient for		the amendment(s)
☐ The amendment(s) was/were approved by the must be separately provided for each voting	e shareholders through voting groups. The f group entitled to vote separately on the amo	
"The number of votes cast for the ame	ndment(s) was/were sufficient for approval	
by	······································	
(va	ing group	
8/9/2023 Dated	3	
Signature	N Govern	
(By a director, pres	ident or other officer - it directors or officer.	
selected, by an inco appointed fiduciary	orporator – if in the hands of a receiver, trust y by that fiduciary)	ee, or other court
NC	EVIA A GARCIA	
 -	(Typed or printed name of person signing)	
	PRESIDENT	
	(Title of person signing)	

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