## PA300076306

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## **COVER LETTER**

TO: Amendment Section

Division of Corporations

P.O. Box 6327

Tallahassee, FL 32314

	<i>C</i> * 1			
NAME OF CORPORATION:	•••	<u>da S.</u>	A. Corp	
DOCUMENT NUMBER:	P23000	0753	06	
The enclosed Articles of Amenda	ment and fee are submitted for	filing.	·	
Please return all correspondence	concerning this matter to the fe	ollowing:		
	6len Name of	da H Contact Person	iernanda Valded	>
	Glenda	S. A	Corp	
	7455	SW) Address	19 Terr	
	City/ Star	te and Zip Code	33155	
E-ma	DrPanysybr il address: (to be used for future	Pan Se annual report not	er 13 & smail.co	·V
For further information concerning	ng this matter, please call:			
Colondo t	tarranda Valla	- 70r	298 1268	
Name of Contact	Person	. () . Area Code d	3981368 & Daytime Telephone Number	
Enclosed is a check for the follow	ving amount made payable to th	ne Florida Departn	nent of State:	
-	tificate of Status Certifier	d Copy nal copy is	\$52.50 Filing Fee Certificate of Status Certified Copy (Additional Copy is enclosed)	ر
<u>Mailing Addro</u> Amendment Se Division of Co	ection	Street Add Amendmen Division of		

The Centre of Tallahassee

Tallahassee, FL 32303

2415 N. Monroe Street, Suite 810

## **Articles of Amendment** to Articles of Incorporation

of	
Glendas	A. Cord
(Name of Corporation as currently	filed with the Florida Dept. of State)
723 000 0	75306
(Document Number of	Corporation (if known)
Pursuant to the provisions of section 607.1006, Florida Statutes, this <i>F</i> its Articles of Incorporation:	Florida Profit Corporation adopts the following amendment(s
A. If amending name, enter the new name of the corporation:	
/	C- Ti
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 MUST BE A STREET ADDRESS)	n/a
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)	n l c
D. If amending the registered agent and/or registered office address:  new registered agent and/or the new registered office address:	
Name of New Registered Agent	N/ C
(Florida stre	et address)
New Registered Office Address:	, Florida
	,
New Registered Agent's Signature, if changing Registered Agent:	C
I hereby accept the appointment as registered agent. I am familiar w	ith and accept the obligations of the position.
Signature of New Re	gistered 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: 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>	Name	<u>Addres</u> s
l) Change		n/c	
Add			
Remove			
2) Change			
Add			
Remove Change			
Add			
Remove			
4) Change			
Add			
Remove			
5) Change			
Add			
Remove			
6) Change			
Add			
Remove			

ttach additional sheets, if necessary).	(Be specific)
. <u>-</u>	
·	
an amendment provides for an exchi rovisions for implementing the amer	ange, reclassification, or cancellation of issued shares, and ment if not contained in the amendment itself:
(if not applicable, indicate N/A)	
We are	changing From
a travel	agency to
11000	11 Oct 10
a retai	1 Store,

· .

• .	
The date of each amendment(s) adopted date this document was signed.	on: $05-16-202$ , if other than the
Effective date if applicable:	05-16-2024
	(no more than 90 days after amendment file date)
Note: If the date inserted in this block of document's effective date on the Department.	does not meet the applicable statutory filing requirements, this date will not be listed as the nent of State's records.
Adoption of Amendment(s)	(CHECK ONE)
The amendment(s) was/were adopted action was not required.	by the incorporators, or board of directors without shareholder action and shareholder
☐ The amendment(s) was/were adopted by the shareholders was/were sufficie	by the shareholders. The number of votes east for the amendment(s) nt for approval.
	by the shareholders through voting groups. The following statement voting group entitled to vote separately on the amendment(s):
"The number of votes cast for th	e amendment(s) was/were sufficient for approval
by	··
	(voting group)
Dated	55-16-2024
selected, by a	c. president or other officer – if directors or officers have not been in incorporator – if in the hands of a receiver, trustee, or other court uciary by that fiduciary)
<del></del> -	Glevida Hernardez Laldes (Typed or printed name of person signing)
	President
	(Title of person signing)