P24000505

(Requestor's Name)
(Address)
(Address)
(City/State/Zip/Phone #)
PICK-UP WAIT MAIL
(Business Entity Name)
(Document Number)
Certified Copies Certificates of Status
Special Instructions to Filing Officer:





500423414905

02/16/24--01030--004 **43.75

TENT OF THE



COVER LETTER

TO: Amendment Section Division of Corporations

Tallahassee, FL 32314

NAME OF CORPORAT	Juste Communica	tion Inc	
DOCUMENT NUMBER	P24000005065		
The enclosed Articles of A		omitted for filing.	
Please return all correspond	dence concerning this mat	ter to the following:	
		Irving Juste	
	-	Name of Contact Persor	1
		Firm/ Company	
	567	0 W. Atlantic Avenue, Ap	1. 201
-		Address	
		Delray Beach, FL 33484	
		City/ State and Zip Code	2
;	astecommunications@gm	ail com	
		ed for future annual report	notification)
	Ti man address, (to be all	cu in turne umuu repon	
For further information cor	ncerning this matter, pleas	e call:	
Irving Juste		954 at (618-3158 de & Daytime Telephone Number
Name of Co	ontact Person	Area Co	de & Daytime Telephone Number
Enclosed is a check for the	following amount made p	oayable 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)
	ent Section of Corporations	Amend Divisio	Address ment Section n of Corporations entre of Tallahassee

The Centre of Tallahassee 2415 N. Monroe Street, Suite 810

Tallahassee, FL 32303

Articles of Amendment to Articles of Incorporation of

Juste Commuication Inc

(Name of Corporation as currently filed with the Florida Dept. of State)

P24000005065

(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:

Juste Communications Inc name must be distinguishable and contain the word "co	rporation " "company " or "ince	Thenew proporated " or the abbreviation "Corn "
"Inc.," or Co.," or the designation "Corp," "Inc," "chartered," "professional association," or the abbre	or "Co". A professional 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.	<u>X</u> ,	
		· · · · · · · · · · · · · · · · · · ·
D. If amending the registered agent and/or register new registered agent and/or the new registered of		er the name of the
Name of New Registered Agent		
	(Florida street address)	<u> </u>
New Registered Office Address:	(City)	Florida
	(City)	(Zip Code)
New Registered Agent's Signature, if changing Regil I hereby accept the appointment as registered agent.		obligations of the position.
Signa	ture of New Registered Agent, if c	changing

Check if applicable

 \blacksquare 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>sv</u>	Sally Smith	
Type of Action (Check One)	<u>Title</u>	<u>Name</u>	<u>Addres</u> s
1) Change		<u></u>	
Add			
Remove			
2) Change			
Add			
Remove Change			
Add			
Remove			
4) Change			
Add			· · · · · · · · · · · · · · · · · · ·
Remove			
5) Change			
Add			
Remove			
6) Change		_	
Add			
Remove			

macii uuumomui ,	ding additional Articl heets, if necessary).	(Be specific)			
·					
	• •				
					
				<u>.</u>	
				*	
<u> </u>					 -
					<u> </u>
					
 _					
					
f an amendment	provides for an excha	nge, reclassificati	on, or cancellat	tion of issued sha	res,
tit not applic	plementing the amenouble, indicate N/A)	<u>Jment II not cont</u>	aineo in the am	enament itsen:	
су пос ц урнес	mic, marcure 1071)				
				- 	- Communication of the Communi
					- -

.: . .

The date of each amendment(s) adoption:/M / 2024 late this document was signed.	, if other than th
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 statutory filing requirements, this date we document's effective date on the Department of State's records.	vill not be listed as th
Adoption of Amendment(s) (CHECK ONE)	
The amendment(s) was/were adopted by the incorporators, or board of directors without shareholder action a action was not required.	nd shareholder
☐ The amendment(s) was/were adopted by the shareholders. The number of votes cast for the amendment(s) by the shareholders was/were sufficient for approval.	
☐ The amendment(s) was/were approved by the shareholders through voting groups. The following statement must be separately provided for each voting group entitled to vote separately on the amendment(s):	
"The number of votes cast for the amendment(s) was/were sufficient for approval	
by" (voting group)	
(voting group)	
Dated 2/15/24 Signature 5	
(By a director, president or other officer – if directors or officers have not been selected, by an incorporator – if in the hands of a receiver, trustee, or other court appointed fiduciary by that fiduciary)	, ,
lavina lucta	
(Typed or printed name of person signing)	
CEO	
(Title of person signing)	