Note: Please print this page and use it as a cover sheet. Type the fax audit number (shown below) on the top and bottom of all pages of the document,

(((H240003534313)))



H240003534313ABCZ

Note: DO NOT hit the REFRESH/RELOAD button on your browser from this page. Doing so will generate another cover sheet.

To:

Division of Corporations

Fax Number : (850)617-6380

From:

Account Name : LAZARUS CORPORATE FILING SERVICE, INC. Account Number : I20000000019 Phone : (305)552-5973 Fax Number : (305)675-5944 **Enter the email address for this business entity to be used for Future. annual report mailings. Enter only one email address please. Email Address:

COR AMND/RESTATE/CORRECT OR O/D RESIGN AE MULTISERVICES INC

Certificate of Status	0
Certified Copy	0
Page Count	02
Estimated Charge	\$35.00

Electronic Filing Menu

Corporate Filing Menu

Help

Articles of Amendment to Articles of Incorporation of

AE MULTISERVICES	STING		
Elorida Document Number:	P24000010211		
Pursuant to the provisions of sec following amendment(s) to its A	ction 607.1006, Florida Statutes, this Florida Particles of Incorporation:	rofit Corporation adopts th	e,
Change all addresse to 4445	w 16th ave Suite 402 Hialeah Fl 33012		
:	· ·		
ADD: 4445 w 16th ave Suite	402 Hialeah Fl 33012	7ALL	
DELETE: 1401 W 29TH ST L	OT C59 HIALEAH, FL 33012	OCT 23	- <u>:</u>
		en	ŋ
		8: 51 SIATI	
	·	P	
·			
Y .		-	
These articles of amendment were	adopted on <u>02/07/2024</u>	:	
The corporation has only one group votes cast for amendment was suffi	of voting stock. This amendment was approved by cient for approval.	the shareholders and the numb	er of
	Acci		
Adalb	perto Echemendia Gonzalez Printed Name and Title		
New Registered Agent's Signature, Thereby accept the appointment as reg	if changing Registered Agent: istered agent. I am familiar with and accept the obligation	ons of the position.	
	Signature of New Registered Agent, if changing		