Division of Corporations Electronic Filing Cover Sheet

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.

(((H240001439813)))



H240001439813ABC%

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 : ROMERO ROMERO & GARCIA ENTERPRISE INC

Account Number : I20230000084 Phone : (305)914-2419 Fax Number : (305)914-2419

Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please.

Empil	Address:			
	MUUL CSS.			

COR AMND/RESTATE/CORRECT OR O/D RESIGN SMARTED TRANSLATIONSA INC

Certificate of Status	0
Certified Copy	0
Page Count	01
Estimated Charge	\$35.00



Electronic Filing Menu

Corporate Filing Menu

Help

COVER LETTER

TO: Amendment Section

P.O. Box 6327

Tallahassee, FL 32314

Division of Corporations NAME OF CORPORATION: ____ Smarted Translationsa Inc DOCUMENT NUMBER: P24000017542 The enclosed Articles of Amendment and fee are submitted for filing. Please return all correspondence concerning this matter to the following: Joshua Muller Bellanger Name of Contact Person Smarted Translations Inc. Firm/ Company 4757 NW 167th Street Address Miami, Florida 33055 City/ State and Zip Code janiomuller@rgtax.com.co E-mail address: (to be used for future annual report notification) For further information concerning this matter, please call: Joshua Muller Bellanger at (305) 914-2419
Area Code & Daytime Telephone Number Name of Contact Person Enclosed is a check for the following amount made payable to the Florida Department of State: S35 Filling Fee □S43.75 Filing Fee & □\$43.75 Filing Fee & ☐\$52.50 Filing Fee Certificate of Status Certified Copy Certificate of Status (Additional copy is Certified Copy (Additional Copy enclosed) is enclosed) Mailing Address Street Address Amendment Section Amendment Section Division of Corporations Division of Corporations

The Centre of Tallahassee

Tallahassee, FL 32303

2415 N. Monroe Street, Suite 810

Articles of Amendment to Articles of Incorporation of

Smarted Translationsa Inc.

(Name of Corporation	as currently filed with the Florida	a Dept. of State)
P24000017542		
(Docume)	nt Number of Corporation (if known)
Pursuant to the provisions of section 607,1006, Florida S ts Articles of Incorporation:	tatutes, this Florida Profit Corpora	tion adopts the following amendment(s
A. If amending name, enter the new name of the cor-	poration:	
Smarted Translations Inc		The new
name must be distinguishable and contain the word "corp" "Inc.," or Co.," or the designation "Corp," "Inc," "chartered," "professional association," or the abbrevi	or "Co". A professional corpor <mark>a</mark>	rated" or the abbreviation "Corp.,"
3. Enter new principal office address, if applicable:		
Principal office address <u>MUST BE A STREET ADDR</u>	PESS)	924
		PR F
	··	· · · · · · · · · · · · · · · · · · ·
Enter new mailing address, if applicable:		
(Mailing address <u>MAY BE A POST OFFICE BOX</u>		-3 9
	· ···	
D. If amending the registered agent and/or registere new registered agent and/or the new registered of		he name of the
Name of New Registered Agent		
	(Florida street address)	
	resortati street agaressi	
New Registered Office Address:	(City)	, Florida (Zip Code)
Few Registered Agent's Signature, if changing Regis hereby accept the appointment as registered agent. I to	tered Agent: am familiar with and accept the obli	gations of the position.
Signati	ire of New Registered Agent, if chair	nging

☐ The amendment(s) is/are being filed pursuant to s. 607.0120 (11) (c), 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>		<u>Name</u>	Address	
1) Change	VP	_	Janio M Muller Garcia	4757 NW 167th Street	
XAdd				Miami, Florida 3305	
Remove					
2) Change					
Add					
Remove 3) Change		_			
Add					
Remove					
4) Change		_			
Add					
Remove					
5) Change					
Add					
Remove					
6) Change				· · · · · · · · · · · · · · · · · · ·	
Add					
Remove					

f amending or adding additional Art Attach additional sheets, if necessary).	(Be specific)
If an amendment provides for an exc	hange, reclassification, or cancellation of issued shares,
provisions for implementing the ame	endment if not contained in the amendment itself:
(if not applicable, indicate N/A)	
	

	each amendi ument was sig	nent(s) adoption:	april	19	2024	, if other than the
Effective da	te <u>if applicat</u>	ole:	(no more than 90 do	ıvs after ame	endment file date)	
Note: If the document's c	date inserted ffective date	I in this block does routhe Department o	not meet the applicable		•	s date will not be listed as the
Adoption of	Amendment	(s) (<u>CF</u>	HECK ONE)			
The amen	dment(s) was s not required	were adopted by the	incorporators, or boar	d of directo	rs without shareholder a	action and shareholder
☐ The amen by the sh	dment(s) was areholders wa	/were adopted by the is/were sufficient for	shareholders. The nu approval.	mber of vot	es cast for the amendme	ent(s)
☐ The amen	dment(s) was eparately pro	were approved by the wing	e shareholders through group entitled to vote	h voting gro eseparately	ups. The following stat on the amendment(s):	ement
	e number of t	intes cast for the ame	ndment(s) was/were s	ufficient for	approval	
by .	1	(1/0)	(ing group)			
j ^e	Dated_	4/19/34	<i>(</i>	_		
	Signatur		w6			
			orporator – if in the ha		or officers have not be eiver, trustee, or other c	
			Joshua	Mull	er Bellange	<u> </u>
			(Typed or printed nam		stanna)	
			(Title of person signin			