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Division of Corporations

Fax Number : (850)617-6380

From:

Account Name : KIJOENNA SERVICES INC

Account Number : I20080000033 : (305)644-3055 Phone Fax Number : (305)644-3052

\*\*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 FE&RO MULTISERVICE INC

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		COVER LETTER				
TO: Amendment Se Division of Cor						
NAME OF CORPO	DRATION: FE&RO MULTISI	ervices inc				
DOCUMENT NUM	P24000018001					
The enclosed Article	s of Amendment and fee are su	bmitted for filing.				
Please return all corr	espondence concerning this ma	tter to the following:				
	CARMEN DOFFOUL					
		Name of Contact Person		_		
		Firm/ Company		_		
	2227 NW 135 TH TER	•		/ 5	2	
	OPA LOCKA, FL 33054	Address		ן ויאנר: ביי וואו	2021 HAR 15	ere
		City/ State and Zip Code			- - -	وي وود يا
	MARGOTDOVI@HOTMAI	L.COM		ζη <sup>±</sup> ···		2 hm.
	E-mail address: (to be us	sed for future annual report notificati	on)		8: 28	5 E
For further informati	ion concerning this matter, pleas	se cail:		' <del>[</del> '	ž	
CARMEN DOFFOL	JL	at(	197633			
Name	e of Contact Person		rtime Telephone Num	iber		
Enclosed is a check	for the following amount made	payable to the Florida Department o	f State:			
■ \$35 Filing Fec	S43.75 Filing Fee & Certificate of Status	Certified Copy Certified Copy is Certified Copy	50 Filing Fee ficate of Status fied Copy litional Copy nelosed)	,		
Ar Di P.o	alling Address nendment Section vision of Corporations D. Box 6327 Ilahassee, FL 32314	Street Address Amendment Sec Division of Corp The Centre of 2415 N. Monro Tallahassec, FL	porations Tallahassee pe Street, Suite 810			

## Articles of Amendment to Articles of Incorporation of

FE&RO MULTISERVICES INC		]	
(Name of Corporation as current	ly filed with the Florida D	ept. of State)	
P24000018001			
(Document Number of	of Corporation (if known)		
Pursuant to the provisions of section 607.1006, Florida Statutes, this its Articles of Incorporation:	Florida Profit Corporation	adopts the following	amendinent(s) to
A. If amending name, enter the new name of the corporation:			
name must be distingulshable and contain the word "corporation," "Inc.," or Co.," or the designation "Corp," "Inc," or "Co". "chartered," "professional association," or the abbreviation "P.A.	A professional corporation	d" or the abbreviation	The new "Corp.," the word
B. Enter new principal office address, if applicable:	2227 NW 135TH TER,	OPA LOCKA FĽ 330	54=
(Principal office address MUST BE A STREET ADDRESS)	<del></del>		<del>20</del>
		55	्राच्या । 
		<u> </u>	
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)	2227 NW 135 TH TER	OPA LOCKA FL 330	9. 54 28
			<del></del>
D. If amending the registered agent and/or registered office add new registered agent and/or the new registered office address	ress in Florida, enter the	name of the	
Name of New Registered Agent			
(Florida str	ree: address)		
New Registered Office Address:		, Florida	
	(City)	(Zip Co.	de)
New Registered Agent's Signature, if changing Registered Agent I hereby accept the appointment as registered agent. I am familiar		lang af the manistre	
The sooy woody, the appointment as regime ea agent. I am filmina	with and accept the obligation	ions of the position.	
Signature of New R	egistered Agent, if changin	9	
	S T THE BOTTON OF COMMISSION		
Check if applicable  The amendment(s) is/arc being filed pursuant to s. 607.0120 (11)	(e), F.S.		

\_\_\_\_ Remove

address of each Office (Attach additional shee Please note the officer: P = President; V = Vic Executive Officer; CFC President, Treasurer, L Changes should be not a change, Mike Jones & Mike Jones, V as Remo	er and/or I ets, if neces. Idirector tit te Presiden 0 = Chief F Director wo ted in the fo leaves the c	sary) le by the first letter of the office title: t; T= Treasurer; S= Secretary; D= Directo; inancial Officer. If an officer/director holds	r; TR= Trustee; more than one tl ed as the PST an	C = Chairma le, Itst the firs d Mike Jones	n or Clerk t letter of e is listed as	; CEO ach off the V.	= Chief îce held. There is
Example: X Change	PT	John Doc					
X Remove	$\underline{\mathbf{v}}$	Mike Jones					
<u>X</u> Add	<u>sv</u>	Sally Smith			÷.*	2	
Type of Action (Check One)	Title	Name	Add	ress 	<b>*</b>	2024 HAR	**77
1) Change	VP	LEONEL FERRER	2227	NW 135 TH	TER-	<del>20</del>	
Add Remove			OPA	LOCKA FL	33 <b>054</b>	5 A# 8:	
2) Change	VP	LEONEL ROMERO	2222	7 NW 135 TH	TERR	28	
X Add			OPA	LOCKA FL	33054		
Remove 3) Change							
Add			<del></del>				
Remove 4) Change							
Add Remove							
5) Change					<del>-</del>	. <u>.                                   </u>	
Add				<u> </u>			
Remove							
δ) Change			<u></u>				
Add			<del></del>				

E. If amending or adding additional Articles, enter change(s) here:  (Attach additional sheets, if necessary). (Be specific)				
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		. الرياسية 	<del>22</del>	
3. If an amendment provides for an exchange, reclassification, or cancellation of is	sued shares,			
provisions for implementing the amendment if not contained in the amendmen	t itself:			
(if not applicable, indicate N/A)				
		•		

The date of each amendment(s) ad	03/14/2024		, if other than	the
date this document was signed.	/2024			
Effective date if applicable:				
	(no more than 90 days after amendment fit	le d <b>ase)</b> 		
Note: If the date inserted in this blood document's effective date on the Dep	ock does not meet the applicable statutory filing requi partment of State's records.	rements, this date	e will not be listed as	th
Adoption of Amendment(s)	(CHECK ONE)			
The amendment(s) was/were adopaction was not required.	sted by the incorporators, or board of directors without	shareholder action	n and shareholder	
☐ The amendment(s) was/were adop by the shareholders was/were suf	oted by the shareholders. The number of votes east for ficient for approval.	the amendment(s)	)	
☐ The amendment(s) was/were approvided for a	roved by the shareholders through voting groups. The feach voting group entitled to vote separately on the amount	following statemer endment(s):	22	
"The number of votes cast i	or the amendment(s) was/were sufficient for approval		2024 HAR I 5 AM 8	
by	(voting group)	'	<u> </u> ა ა	
	(voting group)		SSE AT	9
03/14/202 Dated	4		F 2	)
Signature	mul Terre.		<u>π</u> <b>ω</b>	
selected	rector, president or other officer - if directors or officer, by an incorporator - if in the hands of a receiver, trusted fiduciary by that fiduciary)			
	Samuel Ferri			
	(Typed or printed name of person signing)			
	<i>P.</i>		·····	
•	(Title of person signing)	1		