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To:	Division of Co	norst i oor		
		: (850)617-6380	202	
From:			2024 NOV	77
	Account Name	: VP ACCOUNTING AND SERVICES LLC	<	
	Account Number	: 120240000138	ດ້	ĩ
	Phone	: (786)518-0497 of	_	.
	Fax Number	: (786)667-5135	<u> </u>	- P
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**Enter	the email addres	s for this business entity to be used for future	£	
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Ema	ail Address: PRC	FITAXINC@GMAIL.COM		

COR AMND/RESTATE/CORRECT OR O/D RESIGN DISLUFONCA II CORP

Certificate of Status	0
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Page Count	05
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Corporate Filing Menu

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COVER LETTER

TO: Amendment Section

Division of Corporations

NAME OF CORPORATION: DISLUFONCA II CORP

DOCUMENT NUMBER: P24000023526

The enclosed Articles of Amendment and fee are submitted for filing.

Please return all correspondence concerning this matter to the following:

Name of Contact Person	
PROFITAX INC	
Firm/ Company	
8250 NW 27TH ST STE 309	TALL C
Address	
DORAL, FL 33122	E 6 5
City/ State and Zip Code	
PROFITAXINC@GMAIL.COM	
E-mail address: (to be used for future annual report notification)	

For further information concerning this matter, please call:

JOSE LINARES

Name of Contact Person

at (786) 3503328 Area Code & Daytime Telephone Number

Enclosed is a check for the following amount made payable to the Florida Department of State:

is enclosed)

Mailing Address Amendment Section **Division** of Corporations P.O. Box 6327 Tallahassee, FL 32314

Street Address Amendment Section **Division of Corporations** The Centre of Tallahassee 2415 N. Monroe Street, Suite 810 Tallahassee, FL 32303

Articles of Amendment to Articles of Incorporation of

DISLUFONCA II CORP

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

P24000023526

(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:

A. If amending name, enter the new name of the corporation:

The new name must be distinguishable and contain the word "corporation," "company," or "incorporated" or the abbreviation "Corp.," "Inc.," or Co.," or the designation "Corp," "Inc," or "Co". A professional corporation name must contain the word "chartered," "professional association," or the abbreviation "P.A."

B. <u>Enter new principal office address, if applicable:</u> (Principal office address <u>MUST BE A STREET ADDRESS</u>)	TA L	n.
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		m
C. <u>Enter new mailing address, if applicable:</u> (Mailing address <u>MAY BE A POST OFFICE BOX</u>)		D

D. If amending the registered agent and/or registered office address in Florida, enter the name of the new registered agent and/or the new registered office address:

Name of New Registered Agent (Flortda street address) New Registered Office Address: (City) (Zip Code)

New Registered Agent's Signature, if changing Registered Agent:

I hereby accept the appointment as registered agent. I am familiar with and accept the obligations of the position.

Signature of New Registered 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:

<u>X</u> Change	<u>PT</u>	John Doe	
<u>X</u> Remove	<u>v</u>	Mike Jones	
<u>X</u> Add	<u>sv</u>	Sally Smith	
<u>Type of Action</u> (Check One)	<u>Title</u>	Name	Address
1) Change	T	RICARDO A. MACHO	245 NE 14TH ST
X Add			APT 2311
Remove			MIAMI, FL 33132
2) Change			
Add			SSC B
Remove 3) Change			
Add			
Remove			<u> </u>
4) Change			<u>_</u>
Add			
Remove			
5) Change			
Add			
Remove			
6) Change			
Add			
Remove			

E. <u>If amending or adding additional Articles, enter change(s) here</u>: (Attach *additional sheets, if necessary). (Be specific)*

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F. If an amendment provides for an exchange, reclassification, or cancellation of issued shares, provisions for implementing the amendment if not contained in the amendment itself: (if not applicable, indicate N/A)

STATE '	Page:6 of 6	2024-11-05 23:25:17 GMT	17863647196	From. Jose Linere
	ach amendment(s) adoption ment was signed.		,	if other than the
Effective date	11-06-2024 <u>if applicable</u> :			
		(no more than 90 days after amend	ment file date)	
Note: If the document's ef	date inserted in this block de fective date on the Departme	oes not meet the applicable statutory filin ent of State's records.	g requirements, this date will no	t be listed as the
Adoption of 2	Amendment(s)	(<u>CHECK ONE</u>)		
The amend action was	ment(s) was/were adopted by not required.	y the incorporators, or board of directors w	ithout shareholder action and sha	areholder
The amend by the share	ment(s) was/were adopted by reholders was/were sufficien	y the shareholders. The number of votes c t for approval.	ast for the amendment(s)	
The amend must be se	ment(s) was/were approved parately provided for each w	by the shareholders through voting groups, oting group entitled to vote separately on t	. The following statement the amendment(s):	
"The	number of votes cast for the	amendment(s) was/were sufficient for app	vroval	
			,,	
, <u> </u>	00	(voling group)	' '	22
			29	
	11-05-2024 Dated			
	Signature	AANTEZ	S	5 F
	selected, by an	president or other officer – if directors or or a incorporator – if in the hands of a receive action by that fiduciary)	officers have not been 🛛 🗂 🐃 👘	
	ARGE	NIS GERARDO, ANEZ	ττ. 	Γ.
		(Typed or printed name of person sign	uing)	
	р			
		(Title of person signing)		