	ase print this page and use i shown below) on the top and			iumber		
(((H240004136423)))						
TO:	Division of Corporations Fax Number : (850)61			2024 DEC Secret		
From:	Account Name : PROFITA Account Number : 1202200 Phone : (786)35 Fax Number : (786)36	00143 0-3328		18 AM 10: 1 ARY OF STAT		
	the email address for this mual report mailings. Enter			tune		
Ema	ail Address:profitaxinc@g	mail.com				
	COR AMND/RESTATE/	CORRECT OR O/	D RESIGN			

Electronic Filing Menu

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Corporate Filing Menu



COVER LETTER

TO: Amendment Section

Division of Corporations

NAME OF CORPORATION: _____

DOCUMENT NUMBER: P24000023526

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

Please return all correspondence concerning this matter to the following:

JOSE LINARES

Name of Contact Person

PROFITAX INC

Firm/ Company

8250 NW 27TH ST STE 309

Address

DORAL, FL 33122

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
 at (786)
 3503328

 Name of Contact Person
 Area Code & Daytime Telephone Number

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

🔳 - \$35 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)

Street Address

<u>Mailing Address</u> Amendment Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314

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:

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. Enter new principal office address, if applicable:		
(Principal office address <u>MUST BE A STREET ADDRESS</u>) C. <u>Enter new mailing address, if applicable:</u> (Mailing address <u>MAY BE A POST OFFICE BON</u>)		HOECIB AH D: 17
D. If amending the registered agent and/or registered office add	fress in Florida, enter the name o	<u>f the</u>

D. It amending the registered agent and/or registered office address in Fiorida, enter the name of t new registered agent and/or the new registered office address:

Name of New Registered Agent

(Florida street address)

New Registered Office Address:

(Citv)

___. Florida_____ (Zip Code)

_The _new

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 us 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 \underline{V} Mike Jones <u>X</u> Add SVSally Smith Type of Action Title Address <u>Name</u> (Check One) Т RICARDO A. MACHO 245 NE 14TH ST APT 2311 1) ____ Change MIAMI, FL 33132 Add Х Remove 10440 NW 74TH ST UNIT 207 JOSE A. LINARES S 2) ____ Change **MEDLEY, FL 33178** х Add Remove 3) ____ Change ____ Add ____ Remove 4) Change ____ Add ___ Remove 5) ____ Change ____ Add ___ Remove 6) ____ Change _____ Add Remove

Allach additiona	dding additional Articles, enter ch sheets, if necessary). (Be specific,)		
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f an amandmar	provides for an exchange, reclass	ification or concollation	afteenad charae	
provisions for l	nplementing the amendment if not	contained in the amend	ment itself:	
(if not appli	able, indicate N/A)			
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The date of each amendr date this document was sig		12/16/2024	, if other than the
	12/16/2024		
Effective date <u>if applicat</u>	<u>le</u> :	(no more than 90 days after amendment file da	
		(no more than 90 days after amenament file at	1(c)
Note: If the date inserted document's effective date		ot meet the applicable statutory filing requirem State's records.	ents, this date will not be listed as the
Adoption of Amendment	(s) (<u>CF</u>	IECK ONE)	
The amendment(s) was action was not required		incorporators, or board of directors without share	reholder action and shareholder
The amendment(s) was by the shareholders was		shareholders. The number of votes cast for the approval.	amendment(s)
		e shareholders through voting groups. The follo group entitled to vote separately on the amendi	
"The number of y	otes cast for the ame	ndment(s) was/were sufficient for approval	
100			
by	(110)	ing group)	
	(10)	ing group)	
L Dated	/16/2024		
Signatu		AANTEZ	
		ident or other officer – if directors or officers hat priorator – if in the hands of a receiver, trustee, is by that fiduciary)	
	ARGENIS	GERARDO ANEZ	
		(Typed or printed name of person signing)	
	Р		
		(Title of person signing)	