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.

(((H24000270159 3)))



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 : BUSINESS WORLD TRANSACTIONS, INC.

Account Number : 104512000707

Phone : (305)803-2736 Fax Number : (305)646-1527

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

mail	Addrass			

COR AMND/RESTATE/CORRECT OR O/D RESIGN CHAGO'S MULTISERVICES, CORP

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

Electronic Filing Menu Corporate Filing Menu



Articles of Amendment to Articles of Incorporation

(Name of Corporation as currently filed with the Florida Dept. of State) P24000036048 (Document Number of Corporation (if known) Pursuant to the provisions of section 607.1006, Florida Statutes, this Florida Profit Corporation adopts the following amendments its Articles of Incorporation: A. Hamending 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.". 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 MUST BE A STREET ADDRESS) C. Enter new mailing address flapplicable; (Mailing address MAY BE A POST OFFICE BOX) D. Hamending the registered agent and/or registered office address! Name of New Registered Agent (Florida street address) New Registered Office Address: (City) New Registered Agent's Signature, if changing Registered Agent; Thereby accept the appaintment as registered agent. Tam familiar with and accept the obligations of the position.	of			
Pursuant to the provisions of section 607.1006. Florida Statutes, this Florida Profit Curporation adopts the following amendments its Articles of Incorporation: A. Hamending 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. Enter new principal office address, if applicable: (Principal office address MUST BE A STREET ADDRESS) C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX) D. Hamending the registered agent and/or registered office address: **Name of New Registered Agent** (Florida street address) **New Registered Office Address: (City) **The new name of the position. **New Registered Agent** Signature, if changing Registered Agent: I hereby accept the appointment as registered agent. I am familiar with and accept the obligations of the position.				
(Document Number of Corporation) Pursuant to the provisions of section 607.1006, Florida Statutes, this Florida Profit Corporation adopts the following amendments 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". 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 MUNT BE A STREET ADDRESS) C. Enter new mailing address MAY RE A POST OFFICE BOX) D. If amending the registered agent and/or registered office address: **Name of New Registered Agent** **Name of New Registered Agent** (Florida street address) **New Registered Office Address** **City** (City** **City* **Code** **New Registered Agent's Signature, if changing Registered Agent: 1 am familiar with and accept the obligations of the position.				
Pursuant to the provisions of section 607.1006, Florida Statutes, this Florida Profit Corporation adopts the following amendments its Articles of Incorporation: A. Hamending 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." 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 MUST BE A STREET ADDRESS) C. Enter new mailing address MAY RE A POST OFFICE BOX; D. If amending the registered agent and/or registered office address: Name of New Registered Agent (Florida street address) New Registered Office Address: (City) (City) Repositions of the position. New Registered Agent's Signature, if changing Registered Agent: I hereby accept the appointment as registered ogent. I am familiar with and accept the obligations of the position.				
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. Enter new principal office address, if applicable: (Principal office address MUST BE A STREET ADDRESS) C. Enter new mailing address, if applicable: (Mailing address MAY RE A POST OFFICE BOX) 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 (Florida street address) New Registered Office Address: (City) New Registered Agent's Signature, if changing Registered Agent: I hereby accept the appointment as registered agent. I am familiar with and accept the abligations of the position.				
The new name must be distinguishable and contain the word "corporation," "company," or "incorporated" or the abbreviation "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 MUST BE A STREET ADDRESS) C. Enter new mailing address MAY REAPOST OFFICE BOX) 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 address: Name of New Registered Agent (Florida street address) New Registered Office Address: (City) (City) 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.		Iorida Profit Corporation adopts the following	ng amend	ment(s
name must be distinguishable and contain the word "corporation," "company," or "incorporated" or the abbreviation "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 MUST BE A STREET ADDRESS) C. Enter new mailing address MUST BE A STREET ADDRESS) 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 (Florida street address) New Registered Office Address: (City) Cip 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.	A. If amending name, enter the new name of the corporation:			
"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 MUST BE A STREET ADDRESS) C. Enter new mailing address, if applicable: (Mailing address MAY RE A POST OFFICE BOX) 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 (Florida street address) New Registered Office Address: (City) (City) (City) 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.			The n	iew
B. Enter new principal office address, if applicable: (Principal office address MUST BE A STREET ADDRESS) C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX) 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 (Florida street address) New Registered Office Address: (City) (City) (City) (City) 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.	"Inc.," or Co.," or the designation "Corp," "Inc," or "Co". A	unpany," or "incorporated" or the abbreviati professional corporation name must conta	on "Corp in the we	e, " ord
(Principal office address MUST BE A STREET ADDRESS) C. Enter new mailing address, if applicable: (Mailing address MAY RE A POST OFFICE BOX) 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 (Florida street address) New Registered Office Address: (City) 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.	"chartered," "professional association," or the abbreviation "P.A."	•	<u> </u>	
C. Enter new mailing address, if applicable: (Mailing address MAY RE A POST OFFICE BOX) 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 (Florida street address) New Registered Office Address: (City) (City) 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.		· · · · · · · · · · · · · · · · · · ·	- 22	
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX) 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 (Florida street address) New Registered Office Address: (City) (City) 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.	(Principal office address MUST BE A STREET ADDRESS)		٠٠ د ن	ا آن دن ج
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 (Florida 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.			1>	_ `
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 (Florida 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.				
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	C. Enter new mailing address, if applicable:	:		r e
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 (Florida street address) New Registered Office Address: (City) (City) 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.	(Mailing address MAY BE A POST OFFICE BOX)			-
Name of New Registered Agent (Florida street address) New Registered Office Address: (City) 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.				_
Name of New Registered Agent (Florida street address) New Registered Office Address: (City) 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.		· .		
Name of New Registered Agent (Florida street address) New Registered Office Address: (City) 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.	D. Konney discrete and the state of the stat			-
Name of New Registered Agent (Florida 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.	new registered agent and/or the new registered office address:	ss in Florida, enter the name of the		
(Florida 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.				
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.	Name of New Registerea Agent		-	
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.	(Clasida Assa		-	
(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.		adaress)		
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.	· · · · · · · · · · · · · · · · · · ·			
I hereby accept the appointment as registered agent. I am familiar with and accept the obligations of the position.	ĮC	"y) (Zip C	.oacj	
I hereby accept the appointment as registered agent. I am familiar with and accept the obligations of the position.				
	New Registered Agent's Signature, if changing Registered Agent:			
Signature of New Registered Avent if changing	I hereby accept the appointment as registered agent. I am familiar wit	h and accept the obligations of the position.		
Signature of New Registered Avent if changing				
Signature of New Registered Agent if changing				
S	Signature of New Reg.	istered Agent, if changing		
Check if applicable	Check if applicable			

[☐] 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>	<u>John Doe</u>				
X Remove <u>y</u>		Mike Jones				
X Add	<u>sv</u>	Sally Smith				
Type of Action (Check One)	<u>Title</u>	<u>Name</u>	Address			
1) Change	DP	KAREL J. FERNANDEZ RIZO	730 NW 174 TERRACE	2024		
Add			APT 103	Č,		
X Remove			MIAMI, FL. 33142	2		
2) Change						
Add				- 		
Remove 3) Change	 -					
Add						
Remove						
4) Change						
Add						
Remove						
5) Change						
Add						
Remove						
δ) Change						
Add				 -		
Remove						

	(Be specific)	
		_
- -		
		(.
		1.
		·
		· · · · · · · · · · · · · · · · · · ·
30 amendment provides for		
an amendment provides for an exchi	ange, reclassification, or cancellation of issued shares,	
A A PRIARIE TO THE BUILD BUILD THE STREET	ange, reclassification, or cancellation of issued shares, adment if not contained in the amendment itself:	
an amendment provides for an exching the amer (if not applicable, indicate N/A)	ange, reclassification, or cancellation of issued shares, adment if not contained in the amendment itself:	
A A PROPERTY OF THE PROPERTY OF THE STORY	ange, reclassification, or cancellation of issued shares, adment if not contained in the amendment itself:	
A A PROPERTY OF THE PROPERTY OF THE STORY	ange, reclassification, or cancellation of issued shares, adment if not contained in the amendment itself:	
A A PROPERTY OF THE PROPERTY OF THE STORY	ange, reclassification, or cancellation of issued shares, adment if not contained in the amendment itself:	
A A PRIARIE TO THE BUILD BUILD THE STREET	ange, reclassification, or cancellation of issued shares, adment if not contained in the amendment itself:	
A A 151 AUG 1 AL THI DICTIENTING THE STUBL	ange, reclassification, or cancellation of issued shares, adment if not contained in the amendment itself:	
A A 151 AUG 1 AL THI DICTIENTING THE STUBL	ange, reclassification, or cancellation of issued shares, adment if not contained in the amendment itself:	
A A 151 AUG 1 AL THI DICTIENTING THE STUBL	ange, reclassification, or cancellation of issued shares, adment if not contained in the amendment itself:	
A A 151 AUG 1 AL THI DICTIENTING THE STUBL	ange, reclassification, or cancellation of issued shares, adment if not contained in the amendment itself:	
A A PRIARIE TO THE BUILD BUILD THE STREET	ange, reclassification, or cancellation of issued shares, adment if not contained in the amendment itself:	

_

The date of each amendment(s) adoption:	, if other than the
Effective date if applicable:	
(no more than 90 days after amendment file date)	
Note: If the date inserted in this block does not meet the applicable statutory filing requirements, this date will document's effective date on the Department of State's records.	I not be listed as the
Adoption of Amendment(s) (CHECK ONE)	
■ The amendment(s) was/were adopted by the incorporators, or board of directors without shareholder action and action was not required.	i shareholder
The amendment(s) was/were adopted by the shareholders. The number of votes east for the amendment(s) by the shareholders was/were sufficient for approval.	
☐ The amendment(s) was/were approved by the shareholders through voting groups. The following statement must be separately provided for each voting group entitled to vote separately on the amendment(s):	
"The number of votes cast for the amendment(s) was/were sufficient for approval	
by	
(voting group)	
08-12-2024	100
Dated	
Signature	ς, J ₁ ,
(By a prector, president or other officer - if directors or officers have not been	
sciected, by an incorporator – if in the hands of a receiver, trustee, or other court appointed fiduciary by that fiduciary)	79 (7)
KAREL J. FERNANDEZ RIZO	
(Typed or printed name of person signing)	0
DIRECTOR / PRESIDENT	
(Title of person signing)	