Division of Corporations Electronic Filing Cover Sheet

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To:

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COR AMND/RESTATE/CORRECT OR O/D RESIGN DIRECT DISTRIBUTORS CORP

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

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COVER LETTER

TO: Amendment Se Division of Co						
NAME OF CORP	URATION: DIRECT DISTRIE	UTORS CORP				
NAME OF CORT	MBER: P24000036802					
DOCUMENT NUM	мвек:					
The enclosed Article	es of Amendment and fee are su	bmitted for filing.				
Please return all cor	respondence concerning this ma	tter to the following:				
	ALBA LUCIA VICTORIA V	/IDAL				
		Name of Contact Person	1			
	PRESIDENT					
	 .	Firm/ Company				
	407 LINCOLN RD STE 11 11			202		
	Address		 :	2024 [1]1 19		
	MIAMI BEACH, FL 33015				- 16 85	
		City/ State and Zip Cod	С			} ~र्ट-मी
	DIRECTDISTRIBUTORSCORP@OUTLOOK.COM			AM 10: 12	_ 	
	E-mail address: (to be us	sed for future annual report	notification)		Ö	ر روي ^ي ،
For further informat	ion concerning this matter, pleas	se call:		-	12	
ALBA LUCIA VIC	TORIA VIDAL	at (⁷⁸⁶	8347103			
Nam	e of Contact Person	Area Co	de & Daytime Telephone Nun	nber		
Enclosed is a check	for the following amount made	payable to the Florida Depa	ertment of State:			
■ \$35 Filing Fee	☐\$43.75 Filing Fee & Certificate of Status	Certified Copy (Additional copy is enclosed)	☐\$52.50 Filing Fee Certificate of Status Certified Copy (Additional Copy is enclosed)			
Ai Di P.	mendment Section ivision of Corporations O. Box 6327 allanassee, PL 32314	Amend Division The C 2415 T	Address Iment Section on of Corporations entre of Tallahassee N. Monroe Street, Suite 810 assee FL 32303	,		

Articles of Amendment to Articles of Incorporation of

DIRECT DISTRIBUTORS CORP				
(Name o	of Corporation as currently f	iled with the Florida Dept. of Sta	itc)	
P24000036802		•		
	(Document Number of C	orporation (if known)		
Pursuant to the provisions of section 607, its Articles of Incorporation:	.1006, Florida Statutes, this Flo	orida Profit Corporation adopts th	e following amendme	nt(s) to
A. If amending name, enter the new n	ame of the corporation:			
			The new	
name must he distinguishable and contain "Inc.," or Co.," or the designation "Cohartered," "professional association,"	Corp, " "Inc," or "Co". A p	npany," or "incorporated" or the c professional corporation name m	ibbreviation "Corp.," ust contain the word	ı
B. Enter new principal office address.				
(Principal office address MUST BE A S	IKEEI ADDKESS)		2024	
			; (=	1
			- 10	1.00
C. Enter new mailing address, if appl (Mailing address MAY BE A POST	<u>icable:</u> OFFICE BOX)		(0)	
			# IC: 12	
	•	•	2100	
			2	
D. If amending the registered agent ar		s in Florida, enter the name of t	<u>ac</u>	
new registered agent and/or the ne-	w registered office address: ALBA LUCIA VICTORIA V	/IDAT		
Name of New Registered Agent				
	407 LINCOLAIRD STE 11H	<u> </u>		
	(Florida street MIAMI BEACH	address)	33139	
New Registered Office Address:		ity) , Floric	ta(Zip Code)	
	(C.	197	(rap Cont)	
New Registered Agent's Signature, if of I hereby accept the appointment as regis.	iered agent. I am familiar wit	h and accept the obligations of the	poxition.	
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 curporation, 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.

X Change	<u>P</u> T,	John Doe	
X Remove	<u>v</u>	Mike Jones	
<u>X</u> Add	<u>sv</u>	Sally Smith	
Type of Action (Check One)	Title	<u>Name</u>	<u>∧ddres</u> s
1) Change	P	SILVIO G MARTINERO	407 LINCOLN RD
Add			STE 11 H 2
XX Remove			MIAMI BEACH, FL 33139
2) Change	P	ALBA LUCIA VICTORIA VIDAL	407 LINCOLN RD
XX Add			STEILH ()
Remove Change Add			MIAMI BEACH, FL 33139
Remove 4)ChangeAdd			
Remove 5) Change Add			
Remove 6) Change Add			
Remove			

[amending or adding additional Arti attach additional sheets, if necessary).	(Be specific)	
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		225.5
		
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on amendment provides for an eyal	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)		
		, _

	07/19/2024		
The date of each amendment(s) a date this document was signed.		, if other t	han the
07/ Effective date <u>if applicable</u> :	9/2024		
Effective date it applicable.	(no more than 90 days after amendment	file date)	
Note: If the date inserted in this I document's effective date on the D	ock does not meet the applicable statutory filing requartment of State's records.	uirements, this date will not be listed	d as the
Adoption of Amendment(s)	(CHECK ONE)		
The amendment(s) was/were ad action was not required.	pted by the incorporators, or board of directors withou	it shareholder action and shareholder	
The amendment(s) was/were ad by the shareholders was/were so	pted by the shareholders. The number of votes east for ficient for approval.	or the amendment(s)	
The amendment(s) was/were ap must be separately provided for	roved by the shareholders through voting groups. The each voting group entitled to vote separately on the an	e following statement mendment(s): 1	
"The number of votes cast	for the amendment(s) was/were sufficient for approva	I E	
by		. 9	· commo
	(voting group)	A A	1-1-1
		. ic	
07/19/2024 Dated	1 May .	AM 10: 12	
Signature	1		
sclecto	rector, president or other officer – if directors or offic l, by an incorporator – if in the hands of a receiver, tro ed fiduciary by that fiduciary)		
	ALBA LUCIA VICTORIA VIDAL		
	(Typed or printed name of person signing)		
	PRESIDENT		
	(Title of person signing)		

В