## P24000045464

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## **COVER LETTER**

TO: Amendment Section Division of Corporations

NAME OF CORPOR	RATION: MASESO CORP		
DOCUMENT NUMI	D04000045464		
The enclosed Articles	of Amendment and fee are su	bmitted for filing.	
Please return all corres	spondence concerning this ma	stter to the following:	
	MIGUEL PEREZ		
		Name of Contact Perso	n
	MASESO CORP		
		Firm/ Company	
	3253 FOXCROFT RDG-210		
		Address	
	MIRAMAR, FL 33025		
		City/ State and Zip Cod	e
	MPTAXES.SERVICES@GN	MAIL.COM	
	E-mail address: (to be us	sed for future annual report	notification)
For further information	n concerning this matter, pleas	se call:	
MIGUEL PEREZ		786 at (	319-3888
Name o	of Contact Person	Area Co	de & Daytime Telephone Number
Enclosed is a check for	the following amount made	payable to the Florida Dep	artment of State:
S35 Filing Fee	☐\$43.75 Filing Fee & Certificate of Status	☐\$43.75 Filing Fee & Certified Copy (Additional copy is enclosed)	□\$52.50 Filing Fee Certificate of Status Certified Copy (Additional Copy is enclosed)
Mailing Address  Amendment Section  Division of Corporations  P.O. Box 6327  Tallahassee, FL 32314		Amend Divisio The C	Address Iment Section on of Corporations entre of Tallahassee N. Monroe Street, Suite 810
1 31118	massee, FL 32314	Z413 f	v. Monroe Street, State 810

Tallahassee, FL 32303

## Articles of Amendment to Articles of Incorporation of

MASESO CORP		FIL.
(Name of Corporation P24000045464	n as currently filed with the Florida Do	ept. of State) 2024 AUG 10
-		19
(Docume	ent Number of Corporation (if known)	SECRETAINY O
Pursuant to the provisions of section 607,1006, Florida Sits Articles of Incorporation:	Statutes, this Florida Profit Corporation	adopts the following amends
A. If amending name, enter the new name of the cor	poration:	
		The nev
name must be distinguishable and contain the word "cor "Inc.," or Co.," or the designation "Corp." "Inc.," "chartered," "professional association," or the abbrevi	or "Co". A professional corporation	I" or the abbreviation "Corp.,
B. Enter new principal office address, if applicable: (Principal office address MUST BE A STREET ADDR	RESS )	
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX	0	
D. If amending the registered agent and/or registere new registered agent and/or the new registered of		ame of the
Name of New Registered Agent		
	(Florida street address)	
New Registered Office Address:		, Florida
	(City)	(Zip Code)
New Registered Agent's Signature, if changing Regis I hereby accept the appointment as registered agent. I de-	stered Agent: am familiar with and accept the obligation	ons of the position.
Signati	ure of New Registered Agent, if changing	<del></del>
	y g g g g g g g g g g g g g g g g g g g	,
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)

Example:

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.

X Change	<u>PT</u>	John Doe	
X Remove	<u>v</u>	Mike Jones	
X Add	<u>sv</u>	Sally Smith	
Type of Action (Check One)	<u>Title</u>	<u>Name</u>	<u>Addres</u> s
1) Change	OC	MATIAS SOBEL	3253 FOXCROFT RD APT G-210
Add			MIRAMAR, FL 33025
X Remove			
2) Change		<u> </u>	
Add			
Remove 3) Change			
Add			<del></del>
Remove			
4) Change			
Add			
Remove			
5) Change		<del></del>	
Add			
Remove			<del></del>
6) Change			
Add			
Remove			

	icles, enter change(s) here: (Be specific)	
<del>-</del>		
		·
		· -
		•
<u> </u>		
		<del> </del>
If an amendment provides for an exch	nange, reclassification, or cancellation of issued shares,	
If an amendment provides for an exch provisions for implementing the ame (if not applicable, indicate N/A)	nange, reclassification, or cancellation of issued shares, endment if not contained in the amendment itself:	
provisions for implementing the ame	nange, reclassification, or cancellation of issued shares, endment if not contained in the amendment itself:	
provisions for implementing the ame	hange, reclassification, or cancellation of issued shares, endment if not contained in the amendment itself:	
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provisions for implementing the ame	hange, reclassification, or cancellation of issued shares, endment if not contained in the amendment itself:	
provisions for implementing the ame	hange, reclassification, or cancellation of issued shares, endment if not contained in the amendment itself:	

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The date of each amendment(s	08/12/2024
date this document was signed.	adoption:, if other than th
Effective date <u>if applicable</u> :	
<del></del> -	(no more than 90 days after amendment file date)
Note: If the date inserted in thi document's effective date on the	s block does not meet the applicable statutory filing requirements, this date will not be listed as the Department of State's records.
Adoption of Amendment(s)	(CHECK ONE)
☐ The amendment(s) was/were action was not required.	adopted by the incorporators, or board of directors without shareholder action and shareholder
The amendment(s) was/were a by the shareholders was/were	dopted by the shareholders. The number of votes cast for the amendment(s) sufficient for approval.
	approved by the shareholders through voting groups. The following statement or each voting group entitled to vote separately on the amendment(s):
"The number of votes ca	st for the amendment(s) was/were sufficient for approval
by MIGUEL PEREZ	
	(voting group)
08/12/20 Dated	24
Signature	
selec	director, president or other officer – if directors or officers have not been ted, by an incorporator – if in the hands of a receiver, trustee, or other court inted fiduciary by that fiduciary)
	MIGUEL PEREZ
	(Typed or printed name of person signing)
	MANAGER
	(Title of person signing)

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