

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.

(((H240002649313)))



H240002649313ABC+

Note: DO NOT hit the REFRESH/RELOAD button on your browser from this page. Doing so will generate another cover sheet.

| | Division of Corporations | | |
|-------|--------------------------|--|---|
| | Fax Number | : (850)617-6380 | ; |
| From: | | | |
| | Account Name | : ACCOUNTING GUIDE & TAXES,INC. | • |
| | Account Number | : 074553003252 | |
| | Phone | : (305)826-1711 | |
| | Fax Number | : (305)826-1738 | |
| **F1 | nter the email add | dress for this business entily to be used for future | |
| | | ailings. Enter only one email address please.** | |
| | Email Address: | DIMENO@AGTAXES.COM | |

COR AMND/RESTATE/CORRECT OR O/D RESIGN ACCOUNTING GUIDE & TAXES, INC.

| Certificate of Status | 1 |
|-----------------------|---------|
| Certified Copy | 0 |
| Page Count | 01 |
| Estimated Charge | \$43,75 |



- 1

Electronic Filing Menu Corp

Corporate Filing Menu

Help

A. RAMSEY AUG 7.2024

| IDA DEPT OF REVENUE | Page: 2 of 5 | 2024-08-07 02:07:55 GMT | 13055135651 | From: FERNAND |
|---|--|--|--|--|
| • (H24000264 | (931-3) | | -11 8 | Ų |
| | | Articles of Amendment to | F1LE 2024 AUG -6 | OH 12 47 - |
| | | Articles of Incorporation of | 2024 AUG - 6 | TE STATE |
| ACCOUNTING GUIDE & TA | XES, INC. | | تېرې پې د سېرې يو م | SET. |
| | (Name of Corporat | ion as currently filed with the | Florida Dept. of State) | <u> </u> |
| P95000033853 | | | | |
| | (Docu | ment Number of Corporation (i | fknown) | <u> </u> |
| Pursuant to the provisions of sec its Articles of Incorporation: | ction 607.1006, Florid | a Statutes, this <i>Florida Profit</i> (| Corporation adopts the follow | ving amendment(s) to |
| A. If amending name, enter the | <u>he new name of the c</u> | orporation: | | |
| name must be distinguishable ar "Inc" or Co.," or the design "chartered," "professional asso | nation "Corp." "Inc. | " or "Co". A professional | incorporated" or the abbrevia corporation name must con | The new ation "Corp.," tain the word |
| B. <u>Enter new principal office address, if applicable:</u> (Principal office address <u>MUST BE A STREET ADDRES.</u> | | 1618 SW 14 | 9 AVE | |
| | | \overline{DRFSS} | PEMBROKE PINES, FL 33027 | |
| C. <u>Enter new mailing addres</u> (Mailing address <u>MAY BE.</u> | | | 9 AVE PINES, FL 33027 | |
| | | | | |
| D. <u>If amending the registered</u> <u>new registered agent and/o</u> <u>Name of New Registered</u> | or the new registered | | enter the name of the | |
| new registered agent and/c | or the new registered | office address: | enter the name of the | |
| new registered agent and/c | or the new registered | office address: | enter the name of the | |
| new registered agent and/o Name of Naw Registere | or the new registered ed Agent 1618 SW 1 | office address: 49 AVE (Florida street address) | | |
| new registered agent and/c | or the new registered ed Agent 1618 SW 1 | office address: 49 AVE (Florida street address) | , Florida_33027 | n Codej |
| new registered agent and/o Name of Naw Registere | or the new registered ed Agent 1618 SW 1 | office address: 49 AVE (Florida street address) E PINES | , Florida_33027 | n Codej |

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.

| To: FLORIDA DEPT OF REVENUE | | Page: 3 of 5 2024-08-07 02:07:55 GMT | | 13055135651 | From FERNANDO JIMENO | | |
|--|--|--|---|---|--|--|--|
| (1124000264931-3) |) | | | | | | |
| address of each Officer an (Attach additional sheets, ij Please note the officer/dired P = President; V= Vice Pr Executive Officer: CFO = C President, Treasurer, Direc Changes should be noted in a change, Mike Jones leave Mike Jones, V as Remove, a | nd/or E f neces: ctor titl resident Chief F ctor wo n the fo es the c | Director being added: sary) le by the first letter of th t; T = Treasurer; S = Sa inancial Officer. If an a uld be PTD. llowing manner. Curry orporation, Sally Smith | he office title: ceretary; D= Director; TR= yfficer/director holds more th ently John Doe is listed as th h is named the V and S. Thes. | er/director being removed and Trustee; C = Chairman or Clea ian one title, list the first letter of e PST and Mike Jones is listed o e should be noted as John Doe, | rk: CEO = Chief each office held. 1s the V. There is | | |
| Example: <u>X</u> Change <u>PT</u> | | John Doe | John Doe | | | | |
| X Remove | <u>v</u> | Mike Jones | | | | | |
| <u> </u> | <u>sv</u> | Sally Smith | | | | | |
| Type of Action (Check One) | Title | Name | | Address | | | |
| | D | JIMENO, FI | ERNANDO | 1618 SW 149 AVE | | | |
| Add | | | | PEMBROKE PINES, FL 33 | 015 | | |
| X Remove | | | | | | | |
| 2) Change | | | | | | | |
| Add | | | | | | | |
| Remove 3) Change | | | | | | | |
| Add | | | | | | | |
| Remove | | | | ······ | | | |
| 4) Change | | | | | | | |
| Add | | | | | | | |
| Remove | | | | | | | |
| <i>51</i> Change | | | | | | | |
| Add | | | | | | | |
| Remove | | | | | | | |
| 6) Change | | | | | | | |
| Add | | | | | | | |
| Remove | | | | | | | |
| | | | | | | | |

(H24000264931.3)

(H240002649313)

E. If amending or adding additional Articles, enter change(s) here:

(Attach additional sheets, if necessary). (Be specific)

AMENDING THE ARTICLES TO REMOVE FERNANDO JIMENO AS DIRECTOR.

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)

(H24000264931.3)

| (H240002649313) The date of each amendment(s) ado date this document was signed. Effective date <u>if applicable</u>: | ption: | | | |
|--|---|--|--|---------------------------|
| date this document was signed. | ption: | | | |
| Effective date <u>if applicable</u> : | | · | | , if other than the |
| | | - <u>-</u> | | |
| | (no n | nore than 90 days after amendme | nt file date) | |
| Note: If the date inserted in this blo document's effective date on the Depa | ck does not mee rtment of State' | a the applicable statutory filing r s records. | equirements, this date v | vill not be listed as the |
| Adoption of Amendment(s) | (CHECK | <u>ONE</u>) | | |
| The amendment(s) was/were adopt action was not required. | ed by the incorp | orators, or board of directors with | out shareholder action a | nd shareholder |
| The aniendment(s) was/were adopt by the shareholders was/were suff | | | for the amendment(s) | |
| The amendment(s) was/were appro must be separately provided for ed | | | | |
| | | t(s) was/were sufficient for appro | val | |
| by | (voting gra | | | |
| | (voting gre | (קות) | | |
| Dated08/05/202 | <u>.</u> | | | |
| Signature | E. | 1 /2 5- | | |
| (By a dire selected, | etor, president o by an incorporat fiduciary by the | wher officer – if directors or off or – if in the hands of a receiver, at fiduciary) | icers have not been trustee, or other court | |
| D | ANIEL JIMENO |) | | |
| _ | (Typed | or printed name of person signin | g) | |
| PI | RESIDENT | | | |
| | (Title o | f person signing) | | |