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COVER LETTER

TO: Amendment Section Division of Corporations NAME OF CORPORATION: PARADISE MALL, INC. DOCUMENT NUMBER: The enclosed Articles of Amendment and fee are submitted for filing. Please return all correspondence concerning this matter to the following: ALICIA GARCIA Name of Contact Person PARADISE MALL, INC Firm/ Company 555 NE 15TH STREET #100 Address MIAMI, FLORIDA 33132 City/ State and Zip Code AGARCIA@PEGASOCORP.COM E-mail address: (to be used for future annual report notification) For further information concerning this matter, please call: ALICIA GARCIA Name of Contact Person Enclosed is a check for the following amount made payable to the Florida Department of State: **\$35** Filing Fee □\$43.75 Filing Fee & **□\$43.75** Filing Fee & □\$52.50 Filing Fee Certificate of Status Certified Copy Certificate of Status (Additional copy is Certified Copy enclosed) (Additional Copy is enclosed)

Mailing Address

Amendment Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314

Street Address

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

PARADISE MALL, INC.				
(Name of Corpora	ation as currently filed with t	he Florida Dept. of State)	1	
P97000057898				
(Does	ument Number of Corporation	(if known)		
Pursuant to the provisions of section 607.1006, Flori its Articles of Incorporation:	ida Statutes, this <i>Florida Profi</i>	t Corporation adopts the fe	ollowing amendn	nent(s) to
A. If amending name, enter the new name of the	corporation:			
			The ne	
name must be distinguishable and contain the word ' "Inc.," or Co.," or the designation "Corp," "In- "chartered," "professional association," or the abb	c. or 'Co'. A professiona	"incorporated" or the abb l-corporation name must	reviation "Corp. contain the wor	, '' rd
B. Enter new principal office address, if applicate (Principal office address MUST BE A STREET AL				
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE B	<u> </u>			
D. If amending the registered agent and/or regist		a, enter the name of the		
new registered agent and/or the new registere	ed office address:		202 SE	
Name of New Registered Agent			2 001	ALEY T
	(Florida street address)		- 2 - 2	Care to
New Registered Office Address:		, Florida		777
	(City)		(Zip Gode)	المست
New Registered Agent's Signature, if changing R	legistered Agent:			
I hereby accept the appointment as registered agent.		nt the obligations of the po	sition.	

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 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 Doc	
X Remove	<u>V</u>	Mike Jones	
_X Add	<u>sv</u>	Sally Smith	
Type of Action (Check One)	Title	<u>Name</u>	<u>Addres</u> s
1) Change	VP	JORGE MARTINEZ ADRADOS	555 NE 15TH STREET
X Add			SUITE 100
Remove			MIAMI, FL 33132
2) Change			
Add			
Remove Change			
Add			
Remove			
4) Change			
Add			
Remove			
5) Change		_	
Add			
Remove			
6) Change			
Add			
Remove			

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implementing t	he amendmen	reclassification t if not conta	on, or cancell lined in the a	ation of issued mendment itse	shares, lf:	
						•
	implementing tl	nt provides for an exchange, implementing the amendmen	implementing the amendment if not conta	implementing the amendment if not contained in the a	implementing the amendment if not contained in the amendment itse	nt provides for an exchange, reclassification, or cancellation of issued shares, implementing the amendment if not contained in the amendment itself: licable, indicate N/A)

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The date of each amendment(s) a	doption:	, if other than the
date this document was signed.		
Effective date if applicable:		
• • •	(no more than 90 days after amendment fi	le date)
Note: If the date inserted in this document's effective date on the D	block does not meet the applicable statutory filing requestrement of State's records.	irements, this date will not be listed as the
Adoption of Amendment(s)	(<u>CHECK ONE</u>)	
☐ The amendment(s) was/were ad action was not required.	opted by the incorporators, or board of directors without	shareholder action and shareholder
■ The amendment(s) was/were ad by the shareholders was/were s	opted by the shareholders. The number of votes cast for afficient for approval.	the amendment(s)
	proved by the shareholders through voting groups. The process cach voting group entitled to vote separately on the am	
"The number of votes cas	for the amendment(s) was/were sufficient for approval	
by		
	(voting group)	
10/18/202 Dated Signature		
(By a c selecte	firector, president or other officer – if directors or officered, by an incorporator – if in the hands of a receiver, trusted fiduciary by that fiduciary)	
	FRANCISCO M MARTINEZ-MIYASHIKI	
	(Typed or printed name of person signing)	
	DIRECTOR & PRESIDENT	
	(Title of person signing)	