P991000065597

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COVER LETTER

TO: Amendment Sec	dia.	COVER LETTER	21
Division of Corp			A SER
NAME OF CORPO	KATION:I	shine Association, Inc.	BIT SEP 5 M 9 31
DOCUMENT NUM	BER: P99000068597		19
The enclosed Articles	of Amendment and fee are	e submitted for filing.	9
Please return all corre	spondence concerning this	matter to the following:	
	Rafael Fabian		
	D.C. LELIC B.	Name of Contact Person	
	Rafael Fabian PA	F: (C)	
	10631 N Kendall Drive, S	<u> </u>	
	Miami, FL 33176	Address	
	Maint, FL 33176	City/ State and Zip Code	
70 fo v	106-1	City state and zip code	
	@fabianpa.com E-mail address: (to be	used for future annual report notification)	
For further information	n concerning this matter, pl	 ease call: 	
Rafael Fabian		305 856-6700	
Name o	of Contact Person	Area Code & Daytime Telephone Number	
Enclosed is a check fo	r the following amount mad	 de payable to the Florida Department of State:	
S35 Filing Fee	□S43.75 Filing Fee & Certificate of Status	□\$43.75 Filing Fee & □\$52.50 Filing Fee Certified Copy Certificate of Status (Additional copy is Certified Copy enclosed) (Additional Copy is enclosed)	
Ame Divi P.O.	ling Address indment Section sion of Corporations Box 6327 shassee, FL 32314	Street Address Amendment Section Division of Corporations Clifton Building 2661 Executive Center Circle Tallahassee, FL 32301	

Articles of Amendment to Articles of Incorporation of



Quintero's Sunshine Association, Inc.

Quintero's Sunsmite Association, Inc.	
(Name of Corporation a	as currently filed with the Florida Dept. of State)
P99000068597	.a.
(Document	Number of Corporation (if known)
Pursuant to the provisions of section 607.1006. Florida State Articles of Incorporation:	atutes, this Florida Profit Corporation adopts the following amendment(s)
A. If amending name, enter the new name of the corpo	oration:
√a	The new
name must be distinguishable and contain the word "o "Corp" "Inc.," or Co.," or the designation "Corp," " word "chartered," "professional association," or the abb	corporation," "company," or "incorporated" or the abbreviation Inc," or "Co". A professional corporation name must contain the
3. Enter new principal office address, if applicable:	24301 SW 182 Avenue
Principal office address <u>MUST BE A STREET ADDRE.</u> 	Homestead, FL 33031
Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)	24301 SW 182 Avenue
	Homestead, FL 33031
 If amending the registered agent and/or registered of new registered agent and/or the new registered office 	
n/a	
Name of New Registered Agent	
	(Florida street address)
New Registered Office Address:	
	(City) (Zip Code)
ew Registered Agent's Signature, if changing Register hereby accept the appointment as registered agent. I am	ed Agent:
	jaminai wan and accept the obligations of the position.
Signature	of New Registered Agent, if changing
"	

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>	John Doe		
X Remove	<u>V</u>	Mike Jones		
<u>X</u> Add	<u>sv</u>	Sally Smith		
Type of Action (Check One)	<u>Title</u>	Na	me 	<u>Addres</u> s
1) Change	VSD	Ge	rman Quintero	24301 SW 182nd Avenue
X Add				Homestead, FL 33031
Remove				
2) X Change	PD	So	nia Quintero	24301 SW 182nd Avenue
Add				Homestead, FL 33031
Remove				
3) Change				
Add				
Remove				
4) Change				
Add				
Remove				
5) Ch a nge		_ 		
Add				
Remove				
6) Change		_		
Add		. <u> </u>		
Remove				

F. If amending or adding additional Articl	es enter change(s) here:
(Attach additional sheets, if necessary).	(Be specific)
N/A	
	
F. If an amendment provides for an exchan	nge reclassification, or cancellation of issued shares, ment if not contained in the amendment itself:
(if not applicable, indicate N/A)	
N/A	

The date of each amendment(s)	September 1, 2017 adoption:	, if other than the
date this document was signed.		
Se Effective date if applicable:	ptember 1, 2017	
Effective date it applicable:	(no more than 90 days after amen	adment file date)
Note: If the date inserted in this document's effective date on the I	block does not meet the applicable statutory filidepartment of State's records.	ing requirements, this date will not be listed as the
Adoption of Amendment(s)	(<u>CHECK ONE</u>)	
■ The amendment(s) was/were a by the shareholders was/were	dopted by the shareholders. The number of votes sufficient for approval.	cast for the amendment(s)
	pproved by the shareholders through voting group or each voting group entitled to vote separately on	
"The number of votes ca	of for the amendment(s) was/were sufficient for ap	proval
by		
	(voting group)	
☐ The amendment(s) was/were a action was not required.	lopted by the board of directors without sharehold	der action and shareholder
☐ The amendment(s) was/were a action was not required.	opted by the incorporators without shareholder ac	etion and shareholder
Dated	1/2017	
Signature <u></u> <u> </u>	Lacia () ecintero.	
(Ву а	director, president or other officer - if directors of	r officers have not been
select	ed. by an incorporator – if in the hands of a receiv	ver, trustee, or other court
appor	nted fiduciary by that fiduciary)	
	Sonio Quintero	
	(Typed or printed name of person sig	gning)
	President.	
	(Title of person signing)	