## P99000070904

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## **COVER LETTER**

.

**TO:** Amendment Section Division of Corporations

NAME OF CORPO	RATION: ICR ENTERP	RISES INC	
DOCUMENT NUM	BER: <u>P99000070904</u>		
The enclosed Articles	of Amendment and fee are su	bmitted for filing.	
Please return all corre	spondence concerning this ma	tter to the following:	
	SANDRA CARVALHO	GONCALVES	
		Name of Contact Person	1
	ICR ENTERPRISES INC		
	·	Firm/ Company	
	3046 NE 12TH TERRAC		
	A	Address	
	OAKLANDPARK FL 33	334	
		City/ State and Zip Code	2
	SMCGONCALVES@AC	DL.COM	
	E-mail address: (to be us	sed for future annual report	notification)
For further informatio	n concerning this matter, pleas	se call:	
SANDRA CARVA	LHO GONCALVES	at (_954	647-2233
Name	of Contact Person	Area Coo	de & Daytime Telephone Number
Enclosed is a check fo	or the following amount made	payable to the Florida Depa	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)
Ame Divi P.O	iling Address endment Section ision of Corporations Box 6327 ahassee, Ft. 32314	Amend Divisio The Co 2415 N	Address ment Section n of Corporations entre of Tallahassee N. Monroe Street, Suite 810 essee, FL 32303

## Articles of Amendment Articles of Incorporation of

ICR LUTER (Name of Corporation as curr	PRISES, IUC. ently filed with the Florida Dept. of State)	
P99MM71904		
	er of Corporation (if known)	
Pursuant to the provisions of section 607.1006, Florida Statutes, tits Articles of Incorporation:	this Florida Profit Corporation adopts the following amendment(s) to	
A. If amending name, enter the new name of the corporation	<u> </u>	
name must be distinguishable and contain the word "corporation," Inc.," or Co.," or the designation "Corp," "Inc," or "Co" "chartered," "professional association," or the abbreviation "P.	. A professional corporation name must contain the word	
B. Enter new principal office address, if applicable: (Principal office address <u>MUST BE A STREET ADDRESS</u> )		
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)		
D. If amending the registered agent and/or registered office a new registered agent and/or the new registered office addr	ddress in Florida, enter the name of the	
Name of New Registered Agent		
(Flori L	street address)	
	,	
New Registered Office Address:	, Florida (City)	
New Registered Agent's Signature, if changing Registered Age I hereby accept the appointment as registered agent. I am familia	ent: ar with and accept the obligations of the position.	
Signature of Nev	v 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)

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	PT	John De	<u>oe</u>	
X Remove	$\underline{V}$	Mike Jo	nes	
X Add	<u>sv</u>	Sally Sr	n <u>ith</u>	
Type of Action (Check One)	Title		<u>Name</u>	Address
1+ Change	PSD		CARVALHO,JOAO M.V.	3046 NE 12TH TERRACE
Add				OAKLAND PARK, FL 33334
X Remove				
2) X Change	PSD	<del></del>	GONCALVES, SANDRA	3046 NE 12TH TERRACE
Add				QAKLAND PARK, FL 33334
Remove 3 ) X Change	<u>V</u>		CARVALHO,JOAO C.A.	3046 NE 12TH TERRACE
Add				OAKLAND PARK, FL 33334
Remove				
4) Change		<del></del>		
Add				
Remove				
5 Change	<del></del>	·-	15-72-15-04-0-15-05-0-15-05-0-15-05-0-15-05-0-15-05-0-15-05-0-15-05-0-15-05-0-15-05-0-15-05-0-15-05-0-15-05-0-15-05-0-15-0	
Add				
Remove				
6) Change		_		
Add				
Remove				

	(Be specific)
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ovisions for implementing the amer	ange, reclassification, or cancellation of issued shares, adment if not contained in the amendment itself:
n amendment provides for an excha ovisions for implementing the amer (if not applicable, indicate N/A)	ange, reclassification, or cancellation of issued shares, adment if not contained in the amendment itself:
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ovisions for implementing the amer (if not applicable, indicate N/A)	ange, reclassification, or cancellation of issued shares, and ment if not contained in the amendment itself:

•

The date of each amendment(s) ad date this document was signed.	option:JUNE 1ST 2022	, if other than the
-	JNE 1ST 2022	
	(no more than 90 days after amendment fi	île date)
Note: If the date inserted in this bl document's effective date on the Dej	ock does not meet the applicable statutory filing requ partment 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 adopaction was not required.	oted by the incorporators, or board of directors without	shareholder action and shareholder
X. The amendment(s) was/were adop by the shareholders was/were suf	oted by the shareholders. The number of votes cast for ficient for approval.	the amendment(s)
☐ The amendment(s) was/were appromist he separately provided for e	oved by the shareholders through voting groups. The jach voting group entitled to vote separately on the am	following statement endment(s):
"The number of votes cast f	or the amendment(s) was/were sufficient for approval	
by		
	(voting group)	
DatedSignature	12/23/2022	
(By a dir selected,	ector, president or other officer – if directors or officer, by an incorporator – if in the hands of a receiver, trust d fiduciary by that fiduciary)	
_	SANDRA GONCALVES	
	(Typed or printed name of person signing)	
_	<b>P</b> SD	
_	(Title of person signing)	