547392

(Requestor's Name)
(Address)
(Address)
(Addiess)
(City/State/Zip/Phone #)
PICK-UP WAIT MAIL
(Business Entity Name)
(,
(0)
(Document Number)
Certified Copies Certificates of Status
Special Instructions to Filing Officer:
Special instructions to Filing Officer:

Office Use Only



300329396103

US/23/19--U18U6--U12 **52.58

2019 HAY 23 A III 11

JUN 1 9 2019 T. LEMAEUX

COVER LETTER

TO: Amendment Section Division of Corporations

Tallahassee, FL 32314

NAME OF CORPORATION: Miami International Services Inc.
DOCUMENT NUMBER: 5 42392
The enclosed Articles of Amendment and fee are submitted for filing.
Please return all correspondence concerning this matter to the following:
Elizabeth Reinoso Name of Contact Person
Miami International Services Inc.
4771 NW 72rd AVCNUC Address
Miami FL 33166 City/ State and Zip Code
E-mail address: (to be used for future annual report notification)
For further information concerning this matter, please call: Elizabeth Reinusc at (305) 591-7007 Name of Contact Person Area Code & Daytime Telephone Number
Name of Contact Person Area Code & Daytime Telephone Number
Enclosed is a check for the following amount made payable to the Florida Department of State:
S35 Filing Fee Certificate of Status Certified Copy (Additional copy is enclosed) S52.50 Filing Fee Certificate of Status Certified Copy (Additional Copy is enclosed)
Mailing AddressStreet AddressAmendment SectionAmendment SectionDivision of CorporationsDivision of CorporationsP.O. Box 6327Clifton Building

2661 Executive Center Circle Tallahassee, FL 32301

Articles of Amendment

	10	j	· · · · · · · · · · · · · · · · · · ·
	Articles of Incorporation	• • •	Z,
	of .		
MIAMI INTERNATIO	NAC SERVICES	> 2013 XAY 20 11	
(Name of Corpora	tion as currently filed with the Flo		
5423	92.	TALL THE 2819 MAY 2	3 A 18 H

	(Document Number of Corporation (if known)	· 通過的方式
Pursuant to the provisions of section 607.100 its Articles of Incorporation:	6. Florida Statutes, this Florida Profit Corporation	on adopts the following amendmen
A. If amending name, enter the new name	of the corporation:	
name must be distinguishable and contain "Corp.," "Inc.," or Co.," or the designation word "chartered," "professional association	the word "corporation," "company," or "inc on "Corp," "Inc," or "Co". A professional co on the abbreviation "P.A."	The new corporated" or the abbreviation poration name must contain the
B. Enter new principal office address, if ap (Principal office address <u>MUST BE A STRE</u>	pplicable: EET ADDRESS)	
C. Enter new mailing address, if applicab (Mailing address MAY BE A POST OFF	le: FICE BOX)	
D. If amending the registered agent and/or new registered agent and/or the new re	r registered office address in Florida, enter the gistered office address:	name of the
Name of New Registered Agent	· · · · · · · · · · · · · · · · · · ·	
	(Florida street address)	
New Registered Office Address:		, Florida
	(City)	(Zip Code)
New Registered Agent's Signature, if chang I hereby accept the appointment as registered	ving Registered Agent: lagent. I am familiar with and accept the obliga	tions of the position.
	Signature of Nina Braint and Laure if the	

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	
_X Add	<u>sv</u>	Sally Smith	
Type of Action (Check One)	Title	<u>Name</u>	<u>Addres</u> s
i) Change	T	Reinosc Elaine	4771 NW 7220 AVC
Add X_ Remove			Miami, FL 33160
2) Change			
Add Remove			
3) Change			
Add Remove			
4) Change			
Add Remove			
5) Change	_		
Add Remove			
б) Change			
Add			
Remove			

Attach additional sheets, if necessary).	cles, enter change(s) here (Be specific)			
				
		-	<u>_</u>	
-				
<u> </u>				
			<u> </u>	_
			_	
				_
	<u> </u>			
				
	<u> </u>		<u> </u>	
			- 	
_				
			charac	
an amendment provides for an excha	nge reclassification or	vancellation of iccitod	SHAICS.	
provisions for implementing the amen	inge, reclassification, or o	the amendment itself	<u> </u>	
an amendment provides for an exchaprovisions for implementing the amen (if not applicable, indicate N/A)	inge, reclassification, or oddening or indicated in deep time.	the amendment itsel	<u>f:</u>	
provisions for implementing the amen	inge, reclassification, or diment if not contained in	the amendment itsel	<u>f:</u>	
provisions for implementing the amen	inge, reclassification, or odment if not contained in	the amendment itsel	<u>:</u>	
provisions for implementing the amen	inge, reclassification, or dement if not contained in	the amendment itsel	<u>E</u>	
provisions for implementing the amen	inge, reclassification, or dement if not contained in	the amendment itsel	<u>f:</u>	-
provisions for implementing the amen	inge, reclassification, or diment if not contained in	the amendment itsel	<u>f:</u>	
provisions for implementing the amen	inge, reclassification, or diment if not contained in	the amendment itsel	<u>[:</u>	
provisions for implementing the amen	inge, reclassification, or dement if not contained in	the amendment itsel	<u>f:</u>	
provisions for implementing the amen	inge, reclassification, or dement if not contained in	the amendment itsel	<u>f:</u>	
provisions for implementing the amen	inge, reclassification, or diment if not contained in	the amendment itsel	<u>[:</u>	
provisions for implementing the amen	inge, reclassification, or dment if not contained in	the amendment itsel	<u>[:</u>	
an amendment provides for an exchaprovisions for implementing the amen (if not applicable, indicate N/A)	inge, reclassification, or dement if not contained in	the amendment itsel	<u> </u>	
provisions for implementing the amen	inge, reclassification, or dement if not contained in	the amendment itsel		
provisions for implementing the amen	inge, reclassification, or dment if not contained in	the amendment itsel	<u>[:</u>	

The date of each amendment(s) adoption: 05 03 2019 date this document was signed.	_, if other than the
date this document was signed.	
Effective date if applicable: 05 03 2019	
(no more than 90 days after amendment file date)	
Note: If the date inserted in this block does not meet the applicable statutory filing requirements, this date will r document's effective date on the Department of State's records.	not be listed as the
Adoption of Amendment(s) (CHECK ONE)	
☐ The amendment(s) was/were adopted by the shareholders. The number of votes cast for the amendment(s) by the shareholders was/were sufficient for approval.	
☐ The amendment(s) was/were approved by the shareholders through voting groups. The following statement must be separately provided for each voting group entitled to vote separately on the amendment(s):	
"The number of votes cast for the amendment(s) was/were sufficient for approval	
by	
(voting group)	
☐ The amendment(s) was/were adopted by the board of directors without shareholder action and shareholder action was not required.	
The amendment(s) was/were adopted by the incorporators without shareholder action and shareholder action was not required.	
Dated 05 20 2019 Signature	
(By a director, president or other officer - if directors or officers have not been	•
selected, by an incorporator – if in the hands of a receiver, trustee, or other court	
appointed fiduciary by that fiduciary)	
Elizabeth Reinoso	
(Typed or printed name of person signing)	
President	
(Title of person signing)	