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(Requestor's N	lame)
(Address)	
(Address)	
(City/State/Zip.	/Phone #)
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(Business Enti	ity Name)
(Document Nu	imber)
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COVER LETTER

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TO: Amendment Section Division of Corporations

2022 JIJH 27 AM 9: 34

NAME OF CORPOR	ATION: MONTANO PABON AN	ND ASSOCIATES INC.			—
DOCUMENT NUMB					TAILER LIET.
The enclosed Articles of	of Amendment and fee are su	bmitted for filing.			
Please return all corres	pondence concerning this ma	itter to the following	g:		
		SAHILY CO	RREA		
-		Name of Contac	t Person		
	N	OUVELLE INS	TITUT	ГЕ	
_		Firm/ Comp	•	" "	 _
_	50	0 west 49 stree			
	Address				
Hialeah Florida 33012					
		City/ State and 7	zip Code	!	
<u>-</u>		ahilycorrea@yah			_
	E-mail address: (to be us	sed for future annua	il report	notification)	
For further information	concerning this matter, pleas	se call:			
SAHIL	Y CORREA	at (305	, 609 9218	
Name o	f Contact Person	\		le & Daytime Telephone N	umber
Enclosed is a check for	the following amount made	payable to the Flori	da Depa	rtment of State:	
S35 Filing Fee	□\$43.75 Filing Fee & Certificate of Status	S43.75 Filing Certified Copy (Additional copenclosed)		☐\$52.50 Filing Fee Certificate of Status Certified Copy (Additional Copy is enclosed)	
Amer Divis P.O. 1	ing Address indment Section ion of Corporations Box 6327 hassee, FL 32314		Amendo Division The Ce	Address ment Section n of Corporations entre of Tallahassee ! Monroe Street, Suite 8	10

Tallahassee, FL 32303

Articles of Amendment

Articles of Incorporation

nf

MONTANO PABON AND ASSOCIATES INC.

WONTANO	ABON AND ACCOUNTED INC.	
(Name of Corporation :	as currently filed with the Florida D	ept. of State)
S	S 52074	
	Number of Corporation (if known)	
Pursuant to the provisions of section 607.1006, Florida Strits Articles of Incorporation:	atutes, this Florida Profit Corporation	adopts the following amendment(s) to
A. If amending name, enter the new name of the corpo	oration:	
N/A		The new
name must be distinguishable and contain the word "corpo "Inc" or Co" or the designation "Corp," "Inc," of "chartered," "professional association," or the abbrevia	r "Co". A professional corporation	
B. Enter new principal office address, if applicable:	N/A	
(Principal office address <u>MUST BE A STREET ADDRE</u>	<u></u>	24 ASS
		MS B C
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)	N/A	11: 26 Leknor
D. If amending the registered agent and/or registered		ame of the
new registered agent and/or the new registered offi	- 	
Name of New Registered Agent	N/A	<u> </u>
	(Florida street address)	
	17 No lide (in certain cas)	
New Registered Office Address:	(City)	, Florida /Zip Code)
New Registered Agent's Signature, if changing Registe I hereby accept the appointment as registered agent. I an		one of the position
nereby accept the appointment as registered agent. I an	a jamatar wan ana accept ine oougan	ль ој те розишт.
<u> </u>	and Many Benjaman J. C. and Male	
Signatur	e 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)

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	<u>PT</u>	John Doe	
X Remove	V	Mike Jones	
X Add	<u>SV</u>	Sally Smith	
Type of Action (Check One)	Title	<u>Name</u>	Address
1) Change			
Add			
Remove			2022 TALL
2) Change			
Add			SS. 12
Remove Change			
Add			# 26
Remove			
4) Change			
Add			
Remove			
5) Change			
Add			
Remove			
6) Change			
Add			
Remove			

•). (Be specific)	
	N/A	
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		2022 JUN 24 TĂL AIIASS
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		E.F.
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		26 IRIDA
If an amendment provides for an ex	change, reclassification, or cancellation of issued sha	res.
If an amendment provides for an ex provisions for implementing the an (if not applicable, indicate N/A)	change, reclassification, or cancellation of issued sha nendment if not contained in the amendment itself:	res.
provisions for implementing the an	change, reclassification, or cancellation of issued sha nendment if not contained in the amendment itself:	res.
provisions for implementing the an (if not applicable, indicate N/A)	nendment if not contained in the amendment itself:	res.
provisions for implementing the an (if not applicable, indicate N/A)	change, reclassification, or cancellation of issued shanendment if not contained in the amendment itself: STRUCTURE OF SHARES OWNERSHIP	res.
provisions for implementing the an (if not applicable, indicate N/A)	STRUCTURE OF SHARES OWNERSHIP	res.
old (carlos R. Montano	STRUCTURE OF SHARES OWNERSHIP60%	res.
or implementing the an (if not applicable, indicate N/A) OLD CARLOS R. MONTANO JOSE J PABON CASTRODAD	STRUCTURE OF SHARES OWNERSHIP 60%	res.
old (carlos R. Montano	STRUCTURE OF SHARES OWNERSHIP	res.
OLD S CARLOS R. MONTANO	STRUCTURE OF SHARES OWNERSHIP 60%	res.
OLD S CARLOS R. MONTANO	STRUCTURE OF SHARES OWNERSHIP	res.
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OLD S CARLOS R. MONTANO JOSE J PABON CASTRODAD ALEJANDRO PABON CASTRODAD TOTA RECLASSIFICATIO	STRUCTURE OF SHARES OWNERSHIP	res.
CARLOS R. MONTANO RECLASSIFICATIO CIf not applicable, indicate N/A) OLD STATEMENT OF THE PROPERTY OF THE PR	STRUCTURE OF SHARES OWNERSHIP	res.
CARLOS R. MONTANO RECLASSIFICATIO CIf not applicable, indicate N/A) OLD STATEMENT OF THE PROPERTY OF THE PR	STRUCTURE OF SHARES OWNERSHIP	res.

TOTAL------100%

The date of each amendment(s) addate this document was signed.	option: APRIL 25, 2022	, if other than th
Effective date <u>if applicable</u> :		
	(no more than 90 days after amendment file date	e)
Note: If the date inserted in this b document's effective date on the De	ock does not meet the applicable statutory filing requirement of State's records.	nts, this date will not be listed as th
Adoption of Amendment(s)	(CHECK ONE)	
The amendment(s) was/were ado action was not required.	nted by the incorporators, or board of directors without sharely	holder action and shareholder
☐ The amendment(s) was/were ado by the shareholders was/were su	oted by the shareholders. The number of votes cast for the ar	nendment(s)
must be separately provided for	roved by the shareholders through voting groups. The follow each voting group entitled to vote separately on the amendment or the amendment(s) was/were sufficient for approval (voting group)	
Dated Signature (By a div selected	ector, president of other officer – if directors or officers have by an incorporator – if in the hands of a receiver, trustee, or	not been
арроіліс	d fiduciary by that fiduciary)	
	Carlos R. Montano	
	(Typed or printed name of person signing)	
-	President	
	(Title of person signing)	

State of Florida Department of State

I certify from the records of this office that MONTANO, PABON AND ASSOCIATES, INC. is a corporation organized under the laws of the State of Florida, filed on May 14, 1991.

The document number of this corporation is S52074.

I further certify that said corporation has paid all fees due this office through December 31, 2022, that its most recent annual report/uniform business report was filed on January 26, 2022, and that its status is active.

I further certify that said corporation has not filed Articles of Dissolution.

Given under my hand and the Great Seal of the State of Florida at Tallahassee, the Capital, this the Twenty-sixth day of January, 2022



KAUNUNKU Secretary of State

Tracking Number: 3616966143CC

To authenticate this certificate, visit the following site, enter this number, and then follow the instructions displayed.

https://services.sunbiz.org/Filings/CertificateOfStatus/CertificateAuthentication

2022 FLORIDA PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# S52074

*Entity Name: MONTANO, PABON AND ASSOCIATES, INC.

Current Principal Place of Business:

3271 NW 7ST UNIT #106 MIAMI, FL 33125

Current Mailing Address:

3271 NW 7ST UNIT #106 MIAMI, FL 33125 US

FEI Number: 65-0309142

Certificate of Status Desired: Yes

FILED

Jan 26, 2022 Secretary of State

3616966143CC

Name and Address of Current Registered Agent:

CORREA, SAHILY 500 WEST 49 STREET HIALEAH, FL 33012 US

The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida.

SIGNATURE: SAHILY CORREA

01/26/2022

Electronic Signature of Registered Agent

Date

Officer/Director Detail:

City-State-Zip: MIAMI FL 33125

Title Name

Address

PRESIDENT

MONTANO, CARLOS

3271 N.W. 7 STREET, #106

SECRETARY

Title

Address

VALLEJO, GERARDO Name

> 3271 NW 7ST **UNIT #106**

City-State-Zip: MIAMI_FL_33125

I hereby certify that the information indicated on this report or supplemental report is true and accurate and that my electronic signature shall have the same legal effect as if made under oath, that I am an officer or director of the corporation or the receiver or trustee empowered to execute this report as required by Chapter 607, Florida Statutes, and that my name appears above, or on an attachment with all other like empowered

SIGNATURE: CARLOS R MONTANO

PRESIDENT

01/26/2022