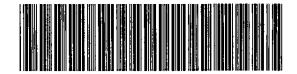
## 158597

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## **COVER LETTER**

TO: Amendment Section

Division of Corporations NAME OF CORPORATION: CASH ON COLLINS, INC DOCUMENT NUMBER: V58597 The enclosed Articles of Amendment and fee are submitted for filing. Please return all correspondence concerning this matter to the following: ROMELIO RIVERON Name of Contact Person CASH ON COLLINS INC Firm/ Company 7424 COLLINS AVE Address MIAMI BEACH, FL 33141 City/ State and Zip Code RENE6315@YAHOO.COM E-mail address: (to be used for future annual report notification) For further information concerning this matter, please call: ROMELIO RIVERON Name of Contact Person Enclosed is a check for the following amount made payable to the Florida Department of State: ■\$43.75 Filing Fee & □ \$35 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) Street Address Mailing Address Amendment Section Amendment Section Division of Corporations Division of Corporations P.O. Box 6327 Clifton Building Tallahassee, FL 32314 2661 Executive Center Circle Tallahassee, FL 32301

## Articles of Amendment to Articles of Incorporation of

CASH ON COLLINS,INC.			
(Name o	f Corporation as currently file	d with the Florida Dept. of State)	
V58597			
	(Document Number of Cor	poration (if known)	
Pursuant to the provisions of section 607. its Articles of Incorporation:	1006, Florida Statutes, this <i>Flori</i>	da Profit Corporation adopts the follo	owing amendment(s) to
A. If amending name, enter the new na	me of the corporation:		
			The new
name must be distinguishable and cont "Corp.," "Inc.," or Co.," or the design word "chartered," "professional associa	ation "Corp," "Inc," or "Co".	A professional corporation name m	ne abbreviation
B. Enter new principal office address,			
(Principal office address MUST BE A S			第 5 -
	- -		31 2
C. Enter new mailing address, if appli (Mailing address MAY BE A POST)	cable:		E. 5.
(Matting dittress MAT BEAT OST)	<u></u>		= =====================================
	<del></del>		31.0 To 1
	_		
D. IC	dlan registered office address	in Florida, anton the name of the	
D. If amending the registered agent an new registered agent and/or the new	w registered office address:	if Pioritia, enter the name of the	
Name of New Registered Agent	ROMELIO RIVERON		
Name of New Registered Agent	7424 COLLINS AVE		
	(Florida street a	ddrassi	<u></u>
	MIAMI BEACH	331	41
New Registered Office Address:	(City	, Florida	(Zip Code)
	(CII)	,	(Zip Colle)
New Registered Agent's Signature, if c I hereby accept the appointment as regist	hanging Registered Agent: tered agent. I am familiar with	and accept the obligations of the posit	ion.
	^		
	Imelia ( Jurm		
	Signature of New Regis	tered 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.

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
1) Change	P	KATY CABRERA	7424 COLLINS AVE
Add			MIAMI BEACH, FL 33141
X Remove			
2) Change	P	ROMELIO RIVERON	7424 COLLINS AVE
X Add			MIAMI BEACH, FL 33141
Remove			
3)Change			
Add			
Remove			
4)Change		_	
Add			
Remove			
5) Change			
Add			
Remove			
6) Change			
O) Change			
<del></del>			
Remove			

Attach addition	adding additional Articles, enter change(s) here: al sheets, if necessary). (Be specific)	
		•
If an amondm	nt provides for an exchange, reclassification, or cancellation of issued shares,	
provisions for	implementing the amendment if not contained in the amendment itself:	
(if not ap	licable, indicate N/A)	

The date of each amendment date this document was signed.		, if other than the
Effective date if applicable:	AUGUST 24, 2017	
	(no more than 90 days after amendment file date)	
Note: If the date inserted in a document's effective date on the	this block does not meet the applicable statutory filing requirements, this date with the Department of State's records.	Il not be listed as the
Adoption of Amendment(s)	(CHECK ONE)	
■ The amendment(s) was/wer by the shareholders was/we	e adopted by the shareholders. The number of votes cast for the amendment(s) are sufficient for approval.	
☐ The amendment(s) was/wer must be separately provide	e approved by the shareholders through voting groups. The following statement d 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)	
	(voting group)	
☐ The amendment(s) was/wer action was not required.	e adopted by the board of directors without shareholder action and shareholder	
☐ The amendment(s) was/wer action was not required.	e adopted by the incorporators without shareholder action and shareholder	
Dated	CB/26/2017 Katu Cerlinera	
Signature	Kati Cerbrera	
(B	y a director, president or other officer - if directors or officers have not been	`
	lected, by an incorporator – if in the hands of a receiver, trustee, or other court pointed fiduciary by that fiduciary)	
	KATY CABRERA	
	(Typed or printed name of person signing)	<del>, , , , , , , , , , , , , , , , , , , </del>
	PRESIDENT	
	(Title of person signing)	