(Re	equestor's Name)	
(Ac	ldress)	
(Ac	ldress)	
(Ci	ty/State/Zip/Phone	e #)
PICK-UP	☐ WAIT	MAIL
(Bı	usiness Entity Nar	ne)
(Do	ocument Number)	
Certified Copies	_ Certificates	s of Status
Special Instructions to	Filing Officer:	

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COVER LETTER

TO: Amendment Section Division of Corporations

NAME OF CORPORATIO	ON: Citco Corporate Sc	ervices, Inc.			
DOCUMENT NUMBER:					
The enclosed Articles of Am	endment and fee are su	bmitted for filing.			
Please return all corresponde	nce concerning this mat	tter to the following:			
Ernes	to Mairhofer				
		Name of Contact Persor)		
Citco	Citco Corporate Services, Inc.				
	<u>·</u>	Firm/ Company			
701 Brickell Ave. Suite 2600					
	Address				
Miam	i, Fl. 33131				
		City/ State and Zip Code			
emairhofer@		10.0			
t:	-mail address: (to be us	ed for future annual report	notification)		
For further information conce	erning this matter, pleas	e call:			
Ernesto Mairhofer		at (³⁰⁵	577-0233		
Name of Con	tact Person	Area Code & Daytime Telephone Numbe			
Enclosed is a check for the following amount made payable to the Florida Department of State:					
■ \$35 Filing Fee	1\$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)		
Mailing Address Amendment Section Division of Corporations P.O. Box 6327 Tallahassee, 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

FILED

N/A (11-60	Pipocat	- Scapingta	3 PM, 4: 12X	-
(<u>Name</u> (of Corporation as currently	filed with the Florida Der	ot. of State)	
N/A	TALLAHASSEE, FL			
	(Document Number of C	Corporation (if known)		
Pursuant to the provisions of section 607. its Articles of Incorporation:	1006. Florida Statutes, this F	lorida Profit Corporation a	idopts the following	g amendment(s) to
A. If amending name, enter the new na	ame of the corporation:			
N/A				The new
name must be distinguishable and con "Corp.," "Inc.," or Co.," or the design word "chartered," "professional associa	nation "Corp," "Inc," or "C	o". A professional corpor		
B. Enter new principal office address, if applicable:		N/A		
(Principal office address <u>MUST BE A S</u>	TREET ADDRESS)			
C. Enter new mailing address, if appli (Mailing address MAY BE A POST)		N/A		
D. If amending the registered agent an new registered agent and/or the new		ss in Florida, enter the na	me of the	
Name of New Registered Agent	N/A			_
	N/A			
	(Florida stree	t address)		-
New Registered Office Address:	N/A		Florida	
	(0	Tity)	(Zip (Code)
New Registered Agent's Signature, if c I hereby accept the appointment as regist		th and accept the obligation	ns of the position.	
	Signature of New Reg	gistered 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>	<u>John Doe</u>	
X Remove	<u>V</u>	Mike Jones	
X Add	<u>sv</u>	Sally Smith	
Type of Action (Check One)	<u>Title</u>	<u>Name</u>	<u>Addres</u> s
1) Change	S	Maria Ameng-Gonzalez	701 Brickell Ave
Add			Suite 2600
X Remove			Miami, FL. 33131
2) Change	S	Agustin Giavedoni	701 Brickell Ave.
X Add	-		Suite 2600
Remove			Miami, FL. 33131
3) Change			
Add		*	
Remove			
4) Change			
Add			
Remove			
5) Change			
Add			
Remove			
O Character			
6) Change			
Add			
Remove			

If amending or adding additional Ar (Attach additional sheets, if necessary).	: (Be specific)
/A	
	
	
If an amendment provides for an exc	change, reclassification, or cancellation of issued shares,
provisions for implementing the am (if not applicable, indicate N/A)	nendment if not contained in the amendment itself:
/A	
···	
	
- · · · · · · · · · · · · · · · · · · ·	
	
	

The date of each amendmendate this document was signed		, if other than the
Effective date if applicable:	August 21, 2018	
	(no more than 90 days after amendment file date)	
	this block does not meet the applicable statutory filing requirements, this dathe Department of State's records.	ate will not be listed as the
Adoption of Amendment(s)	(<u>CHECK ONE</u>)	
	re adopted by the shareholders. The number of votes cast for the amendment(sere sufficient for approval.	s)
	re approved by the shareholders through voting groups. The following statement of the following group entitled to vote separately on the amendment(s):	ent
	s cast for the amendment(s) was/were sufficient for approval	
by	(voting group)	
	(voting group)	
	re adopted by the board of directors without shareholder action and shareholde	er
☐ The amendment(s) was/we action was not required.	re adopted by the incorporators without shareholder action and shareholder	
Augu	st 21, 2018	
Dated		
Signature	5 NA-	
	By a director_president or other officer – if directors or officers have not been	
Se	elected, by an incorporator – if in the hands of a receiver, trustee, or other courppointed fiduciary by that fiduciary)	1
	Ernesto Mairhofer	
	(Typed or printed name of person signing)	
	President	
	(Title of person signing)	