P04000104675

(Requestor's Name)

(Address)

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(Business Entity Name)

(Document Number)

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COVER LETTER

TO: Amendment Section
Division of Corporations

NAME OF CORPORATION: ARKITEKO CO

DOCUMENT NUMBER: P04000104675

The enclosed ***Articles of Amendment*** and fee are submitted for filing.

Please return all correspondence concerning this matter to the following:

ALDO DUCCI
Name of Contact Person

ARKITEKO CO
Firm/ Company

1 ALHAMBRA PLAZA, PH FLOOR
Address

CORAL GABLES/ FL & 33134
City/ State and Zip Code

INFO@ARKITEKO.COM
E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

ALDO DUCCI at (+1) (305) 204 1404

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:

- ■ $35 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)

Mailing Address
Amendment Section
Division of Corporations
P.O. Box 6327
Tallahassee, FL 32314

Street Address
Amendment Section
Division of Corporations
The Centre of Tallahassee
2415 N. Monroe Street, Suite 810
Tallahassee, FL 32303

Articles of Amendment
to
Articles of Incorporation
of

ARKITEKO CO

(Name of Corporation as currently filed with the Florida Dept. of State)

P04000104675

(Document Number of Corporation (if known)

Pursuant to the provisions of section 607.1006, Florida Statutes, this ***Florida Profit Corporation*** adopts the following amendment(s) to its Articles of Incorporation:

A. **If amending name, enter the new name of the corporation:**

Arkitek O Corp

The new name must be distinguishable and contain the word "corporation," "company," or "incorporated" or the abbreviation "Corp.," "Inc.," or Co.," or the designation "Corp." "Inc," or "Co". A professional corporation name must contain the word "chartered," "professional association," or the abbreviation "P.A."

B. **Enter new principal office address, if applicable:**
(Principal office address MUST BE A STREET ADDRESS)

1 ALHAMBRA PLAZA. PH FLOOR
CORAL GABLES. FL 33134

C. **Enter new mailing address, if applicable:**
(Mailing address MAY BE A POST OFFICE BOX)

1 ALHAMBRA PLAZA. PH FLOOR
CORAL GABLES. FL 33134

D. **If amending the registered agent and/or registered office address in Florida, enter the name of the new registered agent and/or the new registered office address:**

Name of New Registered Agent N/A

1 ALHAMBRA PLAZA. PH FLOOR
(Florida street address)

New Registered Office Address: CORAL GABLES, Florida 33134
(City) *(Zip Code)*

New Registered Agent's Signature, if changing Registered Agent:
I hereby accept the appointment as registered agent. I am familiar with and accept the obligations of the position.

N/A
Signature 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)
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	PT	John Doe
X Remove	V	Mike Jones
X Add	SV	Sally Smith

Type of Action (Check One)	Title	Name	Address
1) ___ Change	CEO	GONZALEZ, DAMIAN	
___ Add			
X Remove			
2) ___ Change		BARRETO, GERSOM	
___ Add			
X Remove			
3) X Change	VP	ALTUNAGA, LEONARDO ERIC	1 ALHAMBRA PLAZA.
___ Add			PH FLOOR
___ Remove			CORAL GABLES, FL 33134
4) X Change	P	DUCCI, ALDO	1 ALHAMBRA PLAZA.
___ Add			PH FLOOR
___ Remove			CORAL GABLES, FL 33134
5) ___ Change			
___ Add			
___ Remove			
6) ___ Change			
___ Add			
___ Remove			

E. **If amending or adding additional Articles, enter change(s) here:**
(Attach *additional sheets, if necessary*). *(Be specific)*

N/A

F. **If an amendment provides for an exchange, reclassification, or cancellation of issued shares, provisions for implementing the amendment if not contained in the amendment itself:**
(if not applicable, indicate N/A)

N/A

The date of each amendment(s) adoption: N/A, if other than the date this document was signed.

Effective date if applicable: 08/14/2025

(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 not be listed as the document's effective date on the Department of State's records.

Adoption of Amendment(s) **(CHECK ONE)**

■ The amendment(s) was/were adopted by the incorporators, or board of directors without shareholder action and shareholder action was not required.

☐ 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 N/A."

(voting group)

Dated 08/14/2025

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)

ALDO DUCCI

(Typed or printed name of person signing)

PRESIDENT

(Title of person signing)

2025 FLORIDA PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P04000104675

Entity Name: ARKITEKO CO

Current Principal Place of Business:

601
BRICKELL KEY DR. STE700
MIAMI, FL 33131

Current Mailing Address:

601
BRICKELL KEY DR. STE700
MIAMI , FL 33131 US

FEI Number: 56-2471195

Name and Address of Current Registered Agent:

DUCCI, ALDO
601 BRICKELL KEY DR. STE 700
BRICKELL KEY DR STE700
MIAMI, FL 33131 US

FILED
Feb 12, 2025
Secretary of State
9828320018CC

Certificate of Status Desired: No

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: ALDO DUCCI 02/12/2025

Electronic Signature of Registered Agent Date

Officer/Director Detail :

Title PRESIDENT OK
Name DUCCI, ALDO
Address ~~601~~
~~BRICKELL KEY DR. STE700~~ Update Address
City-State-Zip: ~~MIAMI FL 33131~~

Title ~~CEO~~
Name ~~GONZALEZ, DAMIAN E~~
Address ~~601~~
~~BRICKELL KEY DR. STE700~~
City-State-Zip: ~~MIAMI FL 33131~~

Title ~~COO~~
Name ~~BARRETO, GERSOM~~
Address ~~601~~
~~BRICKELL KEY DR. STE700~~
City-State-Zip: ~~MIAMI FL 33131~~

Title ~~CEO, SECRETARY~~ VP.
Name ALTUNAGA, LEONARDO ERIC
Address ~~601~~
~~BRICKELL KEY DR. STE700~~ Update
City-State-Zip: ~~MIAMI FL 33131~~

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: ALDO DUCCI PRESIDENT 02/12/2025

Electronic Signature of Signing Officer/Director Detail Date

ARKITEK O CORP
1 Alhambra Plaza, PH Floor
Coral Gables, FL 33134
Tel: (305) 204-1404
Email: info@arkiteko.com
Web: www.arkiteko.com

Date: August 14, 2025

TO:
Amendment Section
Division of Corporations
P.O. Box 6327
Tallahassee, FL 32314

RE: Articles of Amendment – ARKITEKO CO to **Akitek O Corp**
Document Number: P04000104675

Dear Amendment Section:

Enclosed please find the completed **Articles of Amendment** form and the required filing fee for the above-referenced corporation. Please direct all correspondence regarding this filing to:

Contact Person: Aldo Ducci
Company Name: Arkitek O Corp
Address: 1 Alhambra Plaza, PH Floor, Coral Gables, FL 33134
Cellphone: (305) 9873536
Email: info@arkiteko.com

Certification:
I hereby certify that the enclosed amendment document has been duly executed and approved in accordance with Chapter 607, Florida Statutes, and that all information provided herein is true and correct.

Aldo Ducci
President
Arkiteko Co

Enclosures:
- Articles of Amendment Form
- Filing Fee Payment