P10000053638

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FILED
2022 MAR 31 AH 7: 00
SECRETARY OF STATE
TALLAHASSEE, FL

O SIMMONS APR 1 6 2022

COVER LETTER

TO: Amendment Section
Division of Corporations

		BERGAMO 68 CO	ORP		
NAME OF CORPOR	ATION:				
DOCUMENT NUMB	DCUMENT NUMBER: P10000053638				
The enclosed Articles of	of Amendment and fee are su	bmitted for filing.			
Please return all corresp	pondence concerning this ma	tter to the following:			
		Cristian Giaculli			
-		Name of Contact Person	n		
	ents Corp				
~	Firm/ Company				
		20200 W Dixie Hwy Ste	e 907		
-	Address				
	Aventura, FL 33180				
_		City/ State and Zip Cod	e		
		gygj77@gmail.coi	n		
-	E-mail address: (to be us	sed for future annual report	notification)		
For further information	concerning this matter, plea	se call:			
Cristian Giaculli		at (987 7240		
Name o	f Contact Person	Area Co	de & Daytime Telephone Number		
Enclosed is a check for	the following amount made	payable to the Florida Dep	artment of State:		
□ \$35 Filing Fee	☐\$43.75 Filing Fee & Certificate of Status	S43.75 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		Ameno Divisio The C	Address Iment Section on of Corporations entre of Tallahassee N. Monroe Street, Suite 810		

Tallahassee, FL 32303

FILED

Articles of Amendment to Articles of Incorporation 2022 MAR 31 AH 7: 00

of
BERGAMO 68 CORP

SECRETARY OF STATE TALLAHASSEE, FL

	P10000053638
(Docum	nent Number of Corporation (if known)
Pursuant to the provisions of section 607,1006. Florida its Articles of Incorporation:	a Statutes, this Florida Profit Corporation adopts the following amendment
A. If amending name, enter the new name of the co	orporation:
	The new
	orporation," "company," or "incorporated" or the abbreviation "Corp.," or "Co". A professional corporation name must contain the word eviation "P.A."
B. Enter new principal office address, if applicable	
(Principal office address <u>MUST BE A STREET ADD</u>	<u>DRESS</u>)
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BO.	1V)
(Figuring address MAT BL AT 031 OFFICE BO.	<u></u>
D. If amending the registered agent and/or register	red office address in Florida, enter the name of the
new registered agent and/or the new registered	
Name of New Registered Agent	
	(Florida street address)
New Registered Office Address:	, Florida
	(City) (Zip Code)
New Registered Agent's Signature, if changing Reg	tistarad Agants
	I am familiar with and accept the obligations of the position.
Sign	ature of New Registered Agent, if changing
gra	and a sy that the governous regions, by arranging

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.

Evample.	, ana sa	i, Smin, Sr us an Mud.	
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
1) Change	P	EMILIO D PALAZZO	20200 W Dixie Hwy 907
Add			Aventura, FL 33180
X Remove			
2) Change	VP	ENRIQUETA S DE LA PENA PALAZZO	20200 W Dixie Hwy 907
Add			Aventura, FL 33180
X Remove	P	Graziana Palazzo	20200 W Dixie Hwy 907
X Add			Aventura, FL 33180
Remove			
4) Change	V	Carlota Palazzo	20200 W Dixie Hwy 907
X Add			Aventura, FL 33180
Remove			
5) Change			
Add			
Remove			
6) Change			
Add			
Remove			

	theets, if necessary).	(Be specific)			
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		change reclassifie	cation, or cancella	ation of issued share	es,
`an amendment	provides for an exc	.mange, rechassin			
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The date of each amendment(s) ad date this document was signed.	option:	, if other than
<u> </u>		
Effective date <u>if applicable</u> :	(no more than 90 days after amenda	nent file datej
Note: If the date inserted in this bl document's effective date on the De	ock does not meet the applicable statutory filing partment of State's records.	g requirements, this date will not be listed as
Adoption of Amendment(s)	(CHECK ONE)	
∑ The amendment(s) was/were ado action was not required.	pted by the incorporators, or board of directors w	ithout shareholder action and shareholder
☐ The amendment(s) was/were ado by the shareholders was/were sul	pted by the shareholders. The number of votes carriclent for approval.	ast for the amendment(s)
	roved by the shareholders through voting groups. each voting group entitled to vote separately on t	
"The number of votes cast t	or the amendment(s) was/were sufficient for app	roval
by		·"
	(voting group)	
DatedSignature	03/08/2022 E (S ₁ >	
(By a disselected	rector, president or other officer – if directors or one, by an incorporator – if in the hands of a receive ed fiduciary by that fiduciary)	
	EMILIO D PALAZZO	
-	(Typed or printed name of person sign	ning)
_	President	
-	(Title of person signing)	

the

the