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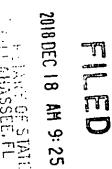
(Re	equestor's Name)	
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(Cit	ty/State/Zip/Phone #))
PICK-UP	☐ WAIT	MAIL
(Bu	isiness Entity Name)	
(Do	ocument Number)	
Certified Copies	_ Certificates of	Status
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Special Instructions to	Filing Officer:	-
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Office Use Only



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C. GOLDEN
DEC 2 7 2018

COVER LETTER

TO: Amendment Section Division of Corporations

NAME OF CORPOR	ATION: KYDALA INC		
DOCUMENT NUMB			
The enclosed Articles of	f Amendment and fee are su	bmitted for filing.	
Please return all corresp	oondence concerning this ma	tter to the following:	
•	CAROLYN KAHL		
-		Name of Contact Person	n
1	ROCA GONZALEZ PA		
_		Firm/ Company	
:	3370 MARY STREET		
-	<u>. </u>	Address	
:	MIAMI, FL 33133		
-	·	City/ State and Zip Cod	e
CKAF	IL@RGPA.COM		
	-	sed for future annual report	notification)
			,
For further information	concerning this matter, pleas	se call:	
CAROLYN KAHL		at (305	8596050
Name of	Contact Person	Area Co	de & Daytime Telephone Number
Enclosed is a check for	the following amount made [payable to the Florida Depa	artment 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)
Amer Divis P.O. 1	ng Address adment Section ion of Corporations Box 6327 nassee, FL 32314	Ameno Divisio Clifton 2661 E	Address Iment Section on of Corporations Building Executive Center Circle assee, FL 32301

Articles of Amendment to Articles of Incorporation

FILED

2018 DEC 18 AM 9: 25

(Name of Corporation as curre	ently filed with the Florida Dept. of State) TALL AHASS
1000091332	
(Document Number	er of Corporation (if known)
rsuant to the provisions of section 607.1006, Florida Statutes, t Articles of Incorporation:	his Florida Profit Corporation adopts the following amendments .
If amending name, enter the new name of the corporation:	<u>:</u>
	The new
me must be distinguishable and contain the word "corpore corp.," "Inc.," or Co.," or the designation "Corp," "Inc," o ord "chartered," "professional association," or the abbreviatio	ation," "company," or "incorporated" or the abbreviation or "Co". A professional corporation name must contain the on "P.A."
Enter new principal office address, if applicable: rincipal office address <u>MUST BE A STREET ADDRESS</u>)	
Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)	
If amending the registered agent and/or registered office and new registered agent and/or the new registered office add	address in Florida, enter the name of the ress:
Name of New Registered Agent	•
(Florid	la street address)
New Registered Office Address:	(City) , Florida (Zip Code)

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>	John De	<u>oe</u>			
X Remove	<u>v</u>	Mike Jo	<u>ones</u>			
X Add	<u>sv</u>	Sally Sr	<u>nith</u>			
Type of Action (Check One)	<u>Title</u>		Name		<u>Addres</u> s	
l) Change	VP	_	CAROZZI, NARA G.	_	3370 MARY STREET	
X Add			·		MIAMI, FL 33133	
Remove	•					
2) Change			·			
Add		_				_
Remove						_
3) Change						
Add		_		_		
Remove						_
4) Change		_		_		
Add						
Remove						
5) Change		_		_		
Add						
Remove						
6) Change		_			· ·	
Add				-		_
Remove				•		

ch additional sheets, if necessary). (Be	specific)
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	-
	-
amendment provides for an exchange, visions for implementing the amendment (if not applicable, indicate N/A)	reclassification, or cancellation of issued shares, ent if not contained in the amendment itself:

. The date of each amendment(s) adoption:, if other
date this document was signed.
Effective date if applicable: (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 liste 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 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" (voting group)
(voting group)
The amendment(s) was/were adopted by the board of directors without shareholder action and shareholder action was not required.
☐ The amendment(s) was/were adopted by the incorporators without shareholder action and shareholder action was not required.
December 4th, 2018 Dated
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)
DANIELA S. CAROZZI
(Typed or printed name of person signing)
PRESIDENT
(Title of person signing)