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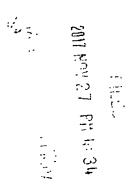
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C. GOLDEN NOV 29 2017

COVER LETTER

TO: Amendment Section Division of Corporations				
NAME OF CORPORATION: ABYSS MIANI CORP				
DOCUMENT NUMBER: P 120000 37275				
The enclosed Articles of Amendment and fee are submitted for filing.				
Please return all correspondence concerning this matter to the following:				
Alexandra Marquez V, lla Name of Contact Person Law office of Valeria Schvartzman P.A. Firm/ Company 12550 Biscagne 6/vd sc.fe 406 Address North MANI, FL, 33181 City/ State and Zip Code				
City/ State and Zip Code Alejandra & Schvlaw. com E-mail address: (to be used for future annual report notification)				
For further information concerning this matter, please call:				
Alejandra Marquez Villa at 305, 794 0114 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 Certificate of Status Certificate of Status Certified Copy Certificate of Status (Additional copy is enclosed) (Additional Copy is enclosed)				
Mailing AddressStreet AddressAmendment SectionAmendment SectionDivision of CorporationsDivision of CorporationsP.O. Box 6327Clifton Building				

2661 Executive Center Circle Tallahassee, FL 32301

Tallahassee, FL 32314

Articles of Amendment to Articles of Incorporation of

Files

of 2017 MCV 2가 P본 및: 음식

Abyss MIANI CORP.	2011 16 17 2 7 3 1 4 4 3 4
P120000 37275	ly filed with the Florida Dept. of State)
P120000 37275	7 (10)
(Document Number of	of Corporation (if known)
Pursuant to the provisions of section 607.1006, Florida Statutes, this its Articles of Incorporation:	Florida Profit Corporation adopts the following amendment(s) to
A. If amending name, enter the new name of the corporation:	
N/A	The new
N/A name must be distinguishable and contain the word "corporatio" "Corp.," "Inc.," or Co.," or the designation "Corp," "Inc," or word "chartered," "professional association," or the abbreviation	"Co". A professional corporation name must contain the
B. Enter new principal office address, if applicable: (Principal office address MUST BE: A STREET ADDRESS)	NA
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)	A/A
D. If amending the registered agent and/or registered office add new registered agent and/or the new registered office addres Name of New Registered Agent NA	
(Florida st	(reet address)
New Registered Office Address:	, Florida
New Registered Office Address.	(City) (Zip Code)
New Registered Agent's Signature, if changing Registered Agen I hereby accept the appointment as registered agent. I am familiar	with and accept the obligations of the position.
Signature of New .	Registered 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	PT John Doc	
X Remove	<u>V</u> <u>Mike Jones</u>	
X Add	SV Sally Smith	
Type of Action (Check One)	<u>Title</u> <u>Name</u>	<u>Addres</u> s
1) Change	TD Jamer Echt	3140 SOCEAN Dr
Add		# 110
X Remove		Hall Jupale, FL, 33009
2) <u>X</u> Change	VP MARCOS ECHT	3140 Socean Dr
Add		# 710
Remove		Hallandile, Fl, 35009
3) X Change	P MARIA Velazauzz	3140 S. ocean Dr
Add		#710
Remove		Halandale, Fl 33009
4) Change		
Add		
Remove		
5) Change		
Add		
Remove		
6) Change		
Add		
Remove		

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)	.1.	ets, if necessary).	(Be specific)			
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The date of each amendment(s) a date this document was signed:	loption: \sim /λ	, if other than the
Effective date if applicable:		
Intective date it applicable.	(no more than 90 days after an	nendment file date)
Note: If the date inserted in this bedocument's effective date on the De		filing requirements, this date will not be listed as the
Adoption of Amendment(s)	(CHECK ONE)	
The amendment(s) was/were add by the shareholders was/were su	pted by the shareholders. The number of vo flicient for approval.	tes east for the amendment(s)
	proved by the shareholders through voting groeach voting group entitled to vote separately	
"The number of votes cast	for the amendment(s) was/were sufficient for	r approval
by	(voting group)	'"
The amendment(s) was/were addressed action was not required.	pted by the board of directors without sharel	nolder action and shareholder
The amendment(s) was/were add action was not required.	pted by the incorporators without shareholde	er action and shareholder
Dated	0/2017	
(By a c	irector, president or other officer – if directo d, by an incorporator – if in the hands of a re ted fiduciary by that fiduciary)	ceiver, trustee, or other court
	Mar cos Echt (Typed or printed name of person	n signing)
	Presidut (Title of person signi	ing)