

P160000006970

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

PICK-UP WAIT MAIL

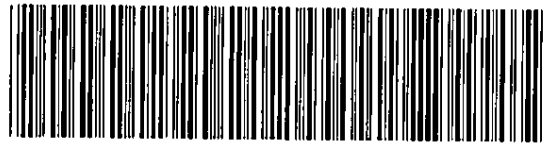
(Business Entity Name)

(Document Number)

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SECRETARY OF STATE
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**CORPORATE
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INC AMEND

1. ANTONY 710 INC.

(CORPORATE NAME AND DOCUMENT #)

2.
(CORPORATE NAME AND DOCUMENT #)

3.
(CORPORATE NAME AND DOCUMENT #)

4.
(CORPORATE NAME AND DOCUMENT #)

5.
(CORPORATE NAME AND DOCUMENT #)

6.
(CORPORATE NAME AND DOCUMENT #)

**SPECIAL
INSTRUCTIONS:**

Articles of Amendment
to
Articles of Incorporation
of

FILED

2023 OCT 20 AM 10:09

Antony 710 Inc.

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

P16000006970

TALLAHASSEE, FLORIDA

(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:

_____ 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**)

66 W Flagler Street, Ste 900, PMB 9816, Miami, FL 33130

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

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 Registered Agent Solutions, Inc.

2894 Remington Green Ln., Ste. A

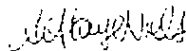
(Florida street address)

New Registered Office Address: Tallahassee, Florida 32308

(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.



Samantha Niels, Assistant Secretary

Signature of New Registered Agent, if changing

Check if applicable

The amendment(s) is/are being filed pursuant to s. 607.0120 (11) (c), 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

<u>Type of Action</u> (Check One)	<u>Title</u>	<u>Name</u>	<u>Address</u>
1) <input type="checkbox"/> Change <input checked="" type="checkbox"/> <u>x</u> Add <input type="checkbox"/> Remove	<u>D, P, S</u>	<u>Giuseppe Rizzi</u>	<u>11501 Century Oaks Terrace 3227</u> <u>Austin, TX 78758</u>
2) <input type="checkbox"/> Change <input type="checkbox"/> Add <input checked="" type="checkbox"/> <u>x</u> Remove	<u>P, D</u>	<u>Francesco Cecchini</u>	<u>P.O. Box 191095</u> <u>Miami Beach, Fl 33119</u>
3) <input type="checkbox"/> Change <input type="checkbox"/> Add <input checked="" type="checkbox"/> <u>x</u> Remove	<u>D</u>	<u>Walter Favaro</u>	<u>P.O. Box 191095</u> <u>Miami Beach, Fl 33119</u>
4) <input type="checkbox"/> Change <input checked="" type="checkbox"/> <u>x</u> Add <input type="checkbox"/> Remove	<u>VP, D</u>	<u>Gabriella Berengo</u>	<u>Via San Pietro N. 55</u> <u>Padova IT 35139</u>
5) <input type="checkbox"/> Change <input type="checkbox"/> Add <input type="checkbox"/> Remove			
6) <input type="checkbox"/> Change <input type="checkbox"/> Add <input type="checkbox"/> Remove			

The date of each amendment(s) adoption: 9/5/2023, if other than the 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 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 _____
 (voting group)

Dated 10/20/2023

Signature Giuseppe Rizzi
 (By a director, president or other officer – if directors or officers have not been appointed fiduciary by that fiduciary)
 Giuseppe Rizzi
 Giuseppe Rizzi
 (Typed or printed name of person signing)

President Giuseppe Rizzi
 (Typed or printed name of person signing)
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