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(((H23000432093 3)))



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Division of Corporations

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From:

Account Name : E ALEX ORTIZ, CPA, PA

Account Number : I20180000017

Phone

: (305)340-2000

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P.O. Box 6327

Tallahassee, FL 32314

COVER LETTER

TO: Amendment Section Division of Corporations NAME OF CORPORATION: __CAPRI INTERNATIONAL INVESTMENTS INC. DOCUMENT NUMBER: P18000056322 The enclosed Articles of Amendment and fee are submitted for filing. Please return all correspondence concerning this matter to the following: ALEX ORTIZ, CPA Name of Contact Person E ALEX ORTIZ, CPA, PA Firm/ Company 2727 PONCE DE LEON BLVD Address CORAL GABLES, FL 33134 City/ State and Zip Code ALEX@ALEXORTIZCPA.COM E-mail address: (to be used for future annual report notitication) For further information concerning this matter, please call: ALEX ORTIZ, CPA Name of Contact Person Enclosed is a check for the following amount made payable to the Florida Department of State: S35 Filing Fee ☐\$43.75 Filing Fee & □\$43.75 Filling Fee & □\$52.50 Filing Fee Certificate of Status Certified Copy Certificate of Status (Additional copy is Certified Copy enclosed) (Additional Copy is enclosed) Mailing Address Street Address Amendment Section Amendment Section Division of Corporations Division of Corporations

The Centre of Taliahassee

Tallahassee, FL 32303

2415 N. Monroe Street, Suite \$10

Articles of Amendment to Articles of Incorporation of

	of		
CAPRI INTERNATIONAL INVESTMENTS INC	•		
(Name of Corporation as curren	tly filed with the Florida I	Dept. of State)	
P18000056322		 	
(Document Number	of Corporation (if known)		
Pursuant to the provisions of section 607,1006, Florida Statutes, this its Articles of Incorporation:	s Florida Profit Corporatio	n adopts the following at	mendment(s) to
A. If amending name, enter the new name of the corporation:			
· · · · · · · · · · · · · · · · · · ·		Ti	не лен
name must be distinguishable and contain the word "corporation," "Inc.," or Co.," or the designation "Corp," "Inc," or "Co". "chartered," "professional association," or the abbreviation "P.A.	A professional corporatio	ed" or the abbreviation " in name must contain th	'Corp" he word
B. Enter new principal office address, if applicable:		•	202
(Principal office address MUST BE A STREET ADDRESS)	****		0 "
			:: (ن
			. 0
C. Enter new mailing address, if applicable:		မ်ာ [*]	<u> </u>
(Mailing address MAY BE A POST OFFICE BOX)			AH S
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			0
	-		
D. If amending the registered agent and/or registered office add	leas in Plantide and and a		
new registered agent and/or the new registered office address	s:	name of the	
Name of New Registered Agent	_		
кате от нем кекиметей лует			
			
(Florida și	reet address)		
New Registered Office Address;		, Florida	
	(City)	(Zip Code	y
day Burlan, 14 at 61 at 15			
New Registered Agent's Signature, if changing Registered Agent hereby accept the appointment as registered agent. I am familiar	<u>t:</u> with and accept the obligat	tions of the position	
	av.m uzoopi me oonga.	toris by the position.	
Signature of New I	Registered Agent, if changin	ng — <u>——</u>	
Check if applicable			
The amendment(s) is/are being filed engaged to a 607 0120 (15)	(a) P.C		



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 = ChiefExecutive 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 Doe	
X Remove	\underline{V}	Mike Jones	
<u>X</u> Add	<u>sv</u>	Sally Smith	
Type of Action (Check One)	Title	<u>Name</u>	<u>Addres</u> s
1) Change	D	SAIEH LANIAS, JESSICA ANDREA	2727 PONCE DE LEON BLVD
Add			CORAL GABLES, FL 33134
X Remove			2023
2) Change	P	SAIEH LAMAS, RICARDO FELIPE	2727 PONCE DE LEON BLVD
Add			CORAL GABLES, FL 33134
X Remove Change	P	SATEH LAMAS, JESSICA ANDREA	2727 PONCE DE LEON BLVDo
X Add			CORAL GABLES, FL-53134
Remove			
4) Change	<u>v</u>	VALDES, ALBERTO	2727 PONCE DE LEON BLVD
X Add			CORAL GABLES, FL 33134
Kemove			
5) Change	D	GAME, NICOLAS	2727 PONCE DE LEON BLVD
X Add			CORAL GABLES, FL 33134
Remove			
6) Change		-	
Add			
Remove			

Attach additional sheets, if necessary).	icles, enter change(s) here: (Be specific)	
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		30 :
		
f an amendment provides for an exch-	ange, reclassification, or cancellation of issued shares,	
provisions for implementing the amer	idment if not contained in the amendment itself:	
City of the transfer of the second		
(if not applicable, indicate N/A)		
(if not applicable, indicate N/A)		
(if not applicable, indicate N/A)		
(if not applicable, indicate N/A)		
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(if not applicable, indicate N/A)		
(if not applicable, indicate N/A)		

The date of each amendment(s) adoption:	
date this document was signed.	, if other than the
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 document's effective date on the Department of State's records.	will not be listed as the
Adaption of Amendment(s) (CHECK ONE)	
■ The amendment(s) was/were adopted by the incorporators, or board of directors without shareholder action action was not required.	
The amendment(s) was/were adopted by the shareholders. The number of votes east for the amendment(s) by the shareholders was/were sufficient for approval.	2023 DEC 19
☐ The amendment(s) was/were approved by the shatcholders through voting groups. The following statement must be separately provided for each voting group entitled to vote separately on the amendment(s):	167
"The number of votes cast for the amendment(s) was/were sufficient for approval	-
by	8: 08 8: 08
Dated X 13/19/2023	
Signature (By a director plesident 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)	MARIA A.A.
JESSICA ANDREA SAJEH LAMAS	
(Typed or printed name of person signing)	-
PRESIDENT	
(Title of person signing)	