P180000 90995

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COVER LETTER

TO: Amendment Section Division of Corporations

NAME OF CORPO	RATION: AQUAFEEL SOL	UTIONS MIAMI CORP.	
	BER: P18000090995		
The enclosed Article	s of Amendment and fee are su	bmitted for filing.	
Please return all corr	espondence concerning this ma	tter to the following:	
	RUBEN D. TORO		
		Name of Contact Person	n
	RUBEN TORO P.A.		
	· · · · · · · · · · · · · · · · · · ·	Firm/ Company	
	7901 KINGSPOINTE PKWY		
		Address	
	ORLANDO FL 32819		
		City/ State and Zip Cod	e
	accounting@rubentorocpa.co	m	
	E-mail address: (to be us	sed for future annual report	notification)
For further informati	on concerning this matter, pleas	se call:	
RUBEN D. TORO		at (<u>407</u>	370-6445
Namo	of Contact Person	Area Co	de & Daytime Telephone Number
Enclosed is a check to	or 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)
Ar Di P.O	ailing Address nendment Section vision of Corporations D. Box 6327 Ilahassee, FL 32314	Ameno Divisio The C	Address Idment Section Idment Section Identify the Corporations Identify the Corporations Identify the Corporation of Tallahassee N. Monroe Street, Suite 810

Tallahassee, FL 32303

Articles of Amendment to Articles of Incorporation of

AQUAFEEL SOLUTIONS MIAMI, CORP. (Name of Corporation as currently filed with the Florida Dept. of State) P18000090995 (Document Number of Corporation (if known) Pursuant to the provisions of section 607.1006, Florida Statutes, this Florida Profit Corporation adopts the following amendment(its Articles of Incorporation: A. If amending name, enter the new name of the corporation: 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) 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 (Florida street address) New Registered Office Address: (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.

Signature of New Registered Agent, if changing

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, 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 = C Executive Officer; CFO = Chief Financial Officer. If an officer/director holds more than one title, list the first letter of each office? 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. The. 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 Cha Mike Jones, V as Remove, and Sally Smith, SV as an Add.

Example: X Change	<u>PT</u>	John Doe	
X Remove	$\underline{\mathbf{V}}$	Mike Jones	
X Add	<u>sv</u>	Sally Smith	
Type of Action (Check One)	<u>Title</u>	<u>Name</u>	Address
1) Change	P	GUSTAVO A. GARCIA	5737 NW 114TH. PATH #112
Add			DORAL FL 33178
X Remove			
2) Change	P	YUBIRY LIZARDO NARVAEZ	7171 NW 102ND. PL
X Add			DORAL FL 33178
Remove 3) Change			
Add			
Remove			
4) Change			
Add			
Remove			
5) Change			
Add			
Remove			
6) Change			
Add			
Remove			

If amending or adding addi (Attach additional sheets, if n	ecessary). (E	Be specific)				
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If an amendment provides						
provisions for implementing (if not applicable, indic	<u>ig the amendr</u> ate N/A)	nent 11 not cont	ained in the am	ienament itseit	<u>:</u>	
	-					
		 .				

	04/12/2020
The date of each amendment(s) adoption	n:, if other than
date this document was signed.	
10 m 1 m 1 m 1 m 1 m 1 m 1 m 1 m 1 m 1 m	
Effective date if applicable:	(no more than 90 days after amendment file date)
	(no more than 90 days after amenament file date)
Note: If the date inserted in this block of document's effective date on the Department	oes not meet the applicable statutory filing requirements, this date will not be listed as ent of State's records.
Adoption of Amendment(s)	(CHECK ONE)
☐ The amendment(s) was/were adopted by action was not required.	by the incorporators, or board of directors without shareholder action and shareholder
The amendment(s) was/were adopted by the shareholders was/were sufficient	by the shareholders. The number of votes cast for the amendment(s) at for approval.
	by the shareholders through voting groups. The following statement voting group entitled to vote separately on the amendment(s):
"The number of votes cast for th	e amendment(s) was/were sufficient for approval
by	· · · · · · · · · · · · · · · · · · ·
oy	(voting group)
04/12/2020	
04/12/2020 Dated	. 1
Dated	
6:	(suited
Signature	, president or other officer - if directors or officers have not been
	in incorporator – if in the hands of a receiver, trustee, or other court
	uciary by that fiduciary)
••	
Gust	ivo A. García
, 	(Typed or printed name of person signing)
Presi	ient
	(Title of person signing)