P200000 13249

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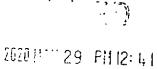
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COVERLETTER

TO: Amendment Section Division of Corporations

NAME OF CO	RPORATION: Q BUONO INC		
	NUMBER: P20000013249		
	ticles of Amendment and fee are st	ubmitted for filing.	
Please return all	correspondence concerning this ma	atter to the following:	
	MARIA GENTILE		
	-	Name of Contact Person	1
	MARIA GENTILE LAW PA	A	
		Firm/ Company	<u> </u>
	1680 MICHIGAN AVE STI	E 700	
		Address	
	MIAMUBEACH, FL, 33139)	
		City/ State and Zip Cod	e
	mariagentileiaw@gmail.con	n.	
	•	sed for future annual report	notification)
For further infor Maria Gentile	mation concerning this matter, plea	ase call:at (, 7772281
<u> </u>	Jame of Contact Person	Area Co	de & Daytime Telephone Number
Enclosed is a ch	eck for the following amount made	payable to the Florida Dep	artment of State:
\$35 Filing F	Cee □\$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)
	Mailing Address Amendment Section Division of Corporations P.O. Box 6327 Fullahassee, FL 32314	Ameno Divisio The C 2415 i	Address Iment Section on of Corporations centre of Tallahassee N. Monroe Street, Suite 810 cssee, Ft. 32303

Articles of Amendment Articles of incorporation of



Q BUONO INC

(Name of Corporation as curren	tly filed with the Florida Dept. of State)
P20000013249	
(Document Number	of Corporation (if known)
Pursuant to the provisions of section 607,1006, Plorida Statutes, this its Articles of Incorporation:	Florida Profit Corporation adopts the following amendment(s) t
A. If amending name, enter the new name of the corporation:	
	The new
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 corporation name must contain the word
B. Enter new principal office address, if applicable:	
(Principal office address <u>MUST BE A STREET ADDRESS</u>)	
C. Enter new mailing address, if applicable:	•
(Mailing address MAY BE A POST OFFICE BOX)	
 If amouding the registered agent and/or registered office addresses registered agent and/or the new registered office addresses. 	
Name of New Registered Agent	
(Florida :	treet address)
	icer and ever
New Registered Office Address:	, Florida
	12.47 (.640)
New Registered Agent's Signature, if changing Registered Agen	<u>t:</u>
I hereby accept the appointment as registered agent.—I am familiar	with and accept the obligations of the position.
Signature of New i	Registered Agent, if changing

s neck if applicable

¹² 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, and address of each Officer and/or Director being added:

- an additional sheets, if necessary)
- now the officer/director title by the first letter of the office title;
- I' 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: XChange	<u>PT</u> <u>John</u>	n Doe	
X Remove	<u>V</u> <u>Mik</u>	e Jones	
X Add	<u>SV</u> <u>Sall</u>	y Smith	
Type of Action (Check One)	Title	<u>Name</u>	<u>Addres</u> s
1) Change	VP.S.D	GRAZIANO PEVERIERI	1680 MICHIGAN AVE STE 700
X Add			MIAMI BEACH, FL, 33139
Remove			
🖰 Change	T	YANETTE GUTIERREZ SIERRA	5227 NW 79 Ave.
` Add			Doral, FL 33166
Remove 3) Change			
Add			_
Remove			
4) Change			
Add			
Remove			
5) Change			
Add			
Remove			
6) Change			
\dd			
Remove			

	(Be specific)			
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·· ———————————————————————————————————				
	hange, reclassification, (or cancellation of issued	<u>d shares,</u>	
an amendment provides for an exc.	endment if not containe	d in the amendment its	e <u>lf:</u>	
provisions for implementing the amo	mannent of not containe			
orovisions for implementing the amo	THE TOTAL CONTENTS			
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The date of each amendment(s) adoption:, 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 from 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)
5/26/2020 Dated
(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)
FABRIZIO PASCUCCIO
(Typed or printed name of person signing)
PRESIDENT
(Title of person signing)