P2000006910Z

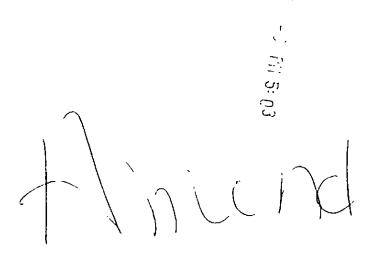
(Req	juestor's Name)	
(Add	Iress)	<u>.</u>
(Add	dress)	
(City	//State/Zip/Phone	e #)
PICK-UP	☐ WAIT	MAIL
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COVER LETTER

TO: Amendment Section Division of Corporations

NAME OF CORPO	RATION: SWEET DESSER	TS MIAMI INC	
DOCUMENT NUM	P20000069102		
The enclosed Articles	of Amendment and fee are su	bmitted for filing.	
Please return all corre	espondence concerning this ma	atter to the following:	
	ALEJANDRO CASTILLO		
		Name of Contact Person	1
	SWEET DESSERTS MIAM	LINC	
		Firm/ Company	
	185 NW 13 AVENUE APT.	533	
	* * ***********************************	Address	
	MIAMI, FL 33125		
		City/ State and Zip Cod	e
	alecastelus@gmail.com		
	E-mail address: (to be us	sed for future annual report	notification)
For further information	on concerning this matter, plea	se call: at (720-3366
Name	of Contact Person	Area Co	de & Daytime Telephone Number
Enclosed is a check for	or the following amount made	payable to the Florida Depa	artment of State:
■ \$35 Filing Fee	☐\$43.75 Filing Fee & Certificate of Status	□\$43.75 Filing Fee & Certified Copy (Additional copy is enclosed)	S52.50 Filing Fee Certificate of Status Certified Copy (Additional Copy is enclosed)
Am Div P.O	iling Address endment Section ision of Corporations . Box 6327 lahassee, FL 32314	Amend Divisio The Co 2415 N	Address ment Section on of Corporations entre of Tallahassee N. Monroe Street, Suite 810 ussee, FL 32303

Articles of Amendment to Articles of Incorporation of

SWEET DESSERTS MIAMLING

SWEET DESSERTS MITANTING	at the state of th
(Name of Corporation as curren	itly filed with the Florida Dept. of State)
	P20000009102
(Document Number	of Corporation (if known)
Pursuant to the provisions of section 607.1006, Florida Statutes, this Articles of Incorporation:	s Florida Profit Corporation adopts the following amendmen
A. If amending name, enter the new name of the corporation:	
N/A	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.	"company," or "incorporated" or the abbreviation "Corp" A professional corporation name must contain the word
B. Enter new principal office address, if applicable:	N/A
Principal office address <u>MUST BE A STREET ADDRESS</u>)	
C. Francisco - dispersation of smaller black	
. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)	N/A
	<u>්</u> ක්
	(.
 If amending the registered agent and/or registered office ad- new registered agent and/or the new registered office address 	
Name of New Registered Agent N/A	
Name of New Regimered Agent	
(Umide a	street address)
(Piorua 5	neet dan ess)
New Registered Office Address:	(City) , Florida (Zip Code)
	(Sib Cons)
ew Registered Agent's Signature, if changing Registered Agen	nt:
hereby accept the appointment as registered agent. I am familiar	
Signatura of View	Registered Agent, if changing
Signature by New .	педалени прет, у стануту
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, 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: XChange	<u>PT</u>	John Doe	
X Remove	<u>V</u>	Mike Jones	
<u>X</u> Add	<u>\$V</u>	Sally Smith	
Type of Action (Check One)	<u>Title</u>	Name	<u>Addres</u> s
1) Change	V	JUAN ROMERO	581 E 64 STREET
Add			HIALEAH, FL 33013
X Remove			
2) Change			
Add			
Remove 3) Change			
Add			
Remove			
4) Change			
Add			
Remove			
5) Change			
Add			
Remove			
6) Change			
Add			
Remove			

E. If amending or adding additional Arti- (Attach additional sheets, if necessary).	<u>cles, enter change(s) here</u> : (Be specific)
N/A	
<u> </u>	
F. If an amendment provides for an exch	ange, reclassification, or cancellation of issued shares,
provisions for implementing the amer (if not applicable, indicate N/A)	ndment if not contained in the amendment itself:
N/A	
	
	
_ _	
 	

The date of each amendment(s) a date this document was signed.	doption:	if other than the
Effective date <u>if applicable</u> :		
	(no more than 90 days after amendment)	file date)
Note: If the date inserted in this locument's effective date on the D	plock does not meet the applicable statutory filing requestrement of State's records.	uirements, this date will not be listed as the
Adoption of Amendment(s)	(<u>CHECK ONE</u>)	
■ The amendment(s) was/were ad action was not required.	opted by the incorporators, or board of directors withou	t shareholder action and shareholder
☐ The amendment(s) was/were ad by the shareholders was/were s	opted by the shareholders. The number of votes cast for afficient for approval.	r the amendment(s)
	proved by the shareholders through voting groups. The each voting group entitled to vote separately on the an	
"The number of votes cast	for the amendment(s) was/were sufficient for approval	
by		
	(voting group)	
09/25/2020 Dated)	
Signature	, Odds	
selecte	irector, president or other officer – if directors or office d, by an incorporator – if in the hands of a receiver, trus ted fiduciary by that fiduciary)	
	ALEJANDRO CASTILLO	
	(Typed or printed name of person signing)	
	PRESIDENT	

(Title of person signing)