P21000013622

(K	equestor's Name)	
(A	ddress)	
(A	ddress)	
(C	ity/State/Zip/Phone	e #)
PICK-UP	WAIT	MAIL
(B	usiness Entity Nan	ne)
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(D	ocument Number)	
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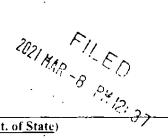
COVER LETTER

TO: Amendment Section Division of Corporations

NAME OF CORPO	RATION: VALORUM FIN	TECH CORP			
	BER: P21000013622				
	of Amendment and fee are st	ubmitted for filing.			
Please return all corre	spondence concerning this ma	atter to the following:			
	JUAN ELIAS MURRA FAL	LLA			
		Name of Contact Perso	n ,		
	VALORUM-FINTECH COL	₹P	•		
		Firm/ Company			
	5101 NW 79th AVENUE U	• •			
		Address .			
	MIAMI FL 33166				
		City/ State and Zip Cod	e ·		
	eortiz@ibarealty.com		•		
	= •	sed for future annual report	notification		
For further informatio	n concerning this matter, plea	se call:			
Name of Contact Person			de & Daytime Telephone Number		
inclosed is a check to	r the following amount made	payable to the Florida Depa	artment of State:		
S35 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)		
Mailing Address			Address		
	endment Section sion of Corporations		ment Section		
P O	Box 6327		n of Corporations entre of Tallahassee		
	nhassee, FL 32314	2415 N. Monroe Street, Suite 810			

Tallahassee, FL 32303

Articles of Amendment to Articles of Incorporation of



VALORUM FINTECH CORP

(Name of	Corporation as currently	filed with the Florida De	pt. of State)
P21000013622			
 :-	(Document Number of	Corporation (if known)	
Pursuant to the provisions of section 607.19 its Articles of Incorporation:	006, Florida Statutes, this F	lorida Profit Corporation	adopts the following amendment(s) to
A. If amending name, enter the new nar	me of the corporation:		
NONE			The new
name must be distinguishable and contain t "Inc.," or Co.," or the designation "Co "chartered," "professional association," o	orp," "Inc," or "Co". A	ompany," or "incorporated professional corporation	" or the abbreviation "Corp.,"
B. Enter new principal office address, if	f annlicable:	NONE	
(Principal office address MUST BE A ST.		•	
			<u> </u>
C. Enter new mailing address, if applies (Mailing address MAY BE A POST O		NONE	
-			
			· · · · · · · · · · · · · · · · · · ·
D. If amending the registered agent and		ss in Florida, enter the n	ame of the
new registered agent and/or the new			
<u>Name of New Registered Agent</u>	NONE		
•			,
	(Florida stree	t address)	<u>-</u>
New Registered Office Address:	NONE		. Florida
	(C	lity)	(Zip Code)
Non-Designation of Assert St. 1997 1998			
New Registered Agent's Signature, if cha I hereby accept the appointment as register	inging Registered Agent: ved agent. I am familiar wit	h and accept the obligatio	ns of the position.
• *	,	,	. ,
		· · · · · · · · · · · · · · · · · · ·	<u> </u>
	Signature of New Reg	istered 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, 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 Doc 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.

X Change	PT John	<u>ı Doe</u>	•
X Remove	<u>V</u> <u>Mik</u>	e Jones .	
X Add	<u>SV</u> <u>Sally</u>	y Smith	
Type of Action (Check One)	<u>Title</u>	<u>Name</u>	Address
1) Change	TREASI	SANDRA CRISTINA PENAGOS T,	5101 NW 79th AVENUE UNIT 2
X Add			MIAMI FL 33166
Remove			
2) Change			· · · · · · · · · · · · · · · · · · ·
Add			
Remove 3) Change		<u> </u>	
Add			
Remove	•		
4) Change			<u> </u>
Add			
Remove	•	·	
5) Change			
Add			
Remove			
6) Change	`	· .	
Add			
Remove	•		•

(Attach additional shee	g additional Articles, ent its, if necessary). (Be spe	rcific)				
FEIN # 86-1910198						
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F. If an amendment prov	vides for an exchange, re	classification, or ca	ncellation of iss	ned shares		
provisions for implen	nenting the amendment i	if not contained in	the amendment	itself:		
(if not applicable,	matcate N/A)			•		
NONE	<u>.</u>	 ,		· 		
			···			
•					_	
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	nt(s) adoption:	, if other than the
date this document was signe		•
Effective date if applicable:	MARCH 01, 2021	
	(no more than 90 days after amendment file date)	
	this block does not meet the applicable statutory filing requirements, this the Department of State's records.	s date will not be listed as the
Adoption of Amendment(s)	(CHECK ONE)	
The amendment(s) was/we action was not required.	ere adopted by the incorporators, or board of directors without shareholder a	action and shareholder
	ere adopted by the shareholders. The number of votes east for the amendment of sufficient for approval.	ent(s)
	ere approved by the shareholders through voting groups. The following stated for each voting group entitled to vote separately on the amendment(s):	ement ·
"The number of vote	es east for the amendment(s) was/were sufficient for approval	
by		
	(voting group)	
FEF Dated Signature	BRUARY 26, 202	
š	by a director, president or other officer – if directors or officers have not be elected, by an incorporator – if in the hands of a receiver, trustee, or other eppointed fiduciary by that fiduciary)	en ourt
	JUAN ELIAS MURRA FALLA	
	(Typed or printed name of person signing)	
	PRESIDENT	
	(Title of person signing)	