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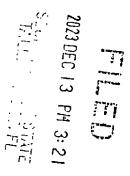
(Requesto	or's Name)			
(Address)				
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(City/State	e/Zip/Phone #)			
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AP

COVER LETTER

TO: Amendment Section Division of Corporations

NAME OF CORPOR	ATION: FARFALLA CRO	CE CORP.			
DOCUMENT NUMB	22000070408				
The enclosed Articles of	of Amendment and fee are su	bmitted for filing.			
Please return all corresp	ondence concerning this ma	tter to the following:			
ŀ	LILIBETH REYES CRUZ				
-	Name of Contact Person				
1	FARFALLA CROCE CORP				
-	Firm/ Company				
	140 WEST 74 ST APT.203				
-	Address				
1	HIALEAH FL 33014				
-		City/ State and Zip C	ode		
ı	ilibeth.reyes2392@gmail.com	n			
-	E-mail address: (to be us	ed for future annual rep	ort notification)		
	concerning this matter, please	se call:			
LILIBETH REYES CF	· · · · · · · · · · · · · · · · · · ·	at (8462464		
Name o	f Contact Person	Area	Code & Daytime Telephone Number		
Enclosed is a check for	the following amount made	payable to the Florida D	epartment of State:		
■ \$35 Filing Fee	☐\$43.75 Filing Fee & Certificate of Status	S43.75 Filing Fee of Certified Copy (Additional copy is enclosed)			
Ame Divis P.O.	ing Address ndment Section tion of Corporations Box 6327 hassee, FL 32314	Am Div The 241	eet Address endment Section ision of Corporations c Centre of Tallahassee 5 N. Monroe Street, Suite 810 ahassee, FL 32303		

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)

Example:

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.

X Change	<u>PT</u>	John Doe	
X Remove	<u>v</u>	Mike Jones	
X Add	<u>sv</u>	Sally Smith	
Type of Action (Check One)	Title	<u>Name</u>	Address
I) X Change	P	LILIBETH REYES CRUZ	1140 WEST 74 ST
Add			HIALEAH FL 33014
Remove			
2) Change			
Add			
X Remove 3) Change	P	YENIA CRUZ URANGA	
Add			
X Remove			
4) Change	INCOR	YENIA CRUZ URANGA	
Add			
Remove			
5) Change			
Add			
Remove			
6) Change			
Add			
Remove			

	12/06/2023	
The date of each amendment(s) and the date of each amendment(s) and date this document was signed.	idoption:	, if other than the
date this document was signed.		
Effective date <u>if applicable</u> :		
	(no more than 90 days after amendment file date)	
Note: If the date inserted in this document's effective date on the D	block does not meet the applicable statutory filing requirements, this epartment of State's records.	s date will not be listed as the
Adoption of Amendment(s)	(CHECK ONE)	
The amendment(s) was/were ac action was not required.	opted by the incorporators, or board of directors without shareholder	action and shareholder
☐ The amendment(s) was/were ac by the shareholders was/were s	opted by the shareholders. The number of votes cast for the amendmufficient for approval.	ent(s)
	proved by the shareholders through voting groups. The following star each voting group entitled to vote separately on the amendment(s):	tement
"The number of votes cas	t for the amendment(s) was/were sufficient for approval	
by	,	
	(voting group)	
Dated		
Signature	D	
(By a select	director, president or other officer – if directors or officers have not beed, by an incorporator – if in the hands of a receiver, trustee, or other officers by that fiduciary)	
	LILIBETH REYES CRUZ	
	(Typed or printed name of person signing)	
	PRESIDENT	
	(Title of person signing)	_