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COVER LETTER

TO: Amendment Section Division of Corporations

NAME OF CORPO	RATION:	AKBUNI PA	
DOCUMENT NUM	BER: P19000003901		
The enclosed Articles	s of Amendment and fee are su	bmitted for filing.	
Please return all corre	espondence concerning this ma	tter to the following:	
	RAYONDA WILLIAMS		
		Name of Contact Persor	1
	PERFECT CIRCLE GROUP	•	
		Firm/ Company	
	1221 BRICKELL AVE, SUI	TE 900	
		Address	
	MIAMI, FL 33131		
		City/ State and Zip Code	e
RW	@PERFCIRCLEWW.COM		
	E-mail address: (to be us	sed for future annual report	notification)
For further information	on concerning this matter, pleas	se call:	
RAYONDA WILLIA	AMS	at (_305	995-8255
Name	of Contact Person		de & Daytime Telephone Number
Enclosed is a check for	or 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)	□\$52.50 Filing Fee Certificate of Status Certified Copy (Additional Copy is enclosed)

Mailing Address
Amendment Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314

Street Address
Amendment Section Division of Corporations Clifton Building 2661 Executive Center Circle Tallahassee, FL 32301

Articles of Amendment to Articles of Incorporation of

NINO CASTRO CARRON	A CI 1

(Name of Corporation as currently filed with the Florida Dept. of State) (Document Number of Corporation (if known) Pursuant to the provisions of section 607.1006, Florida Statutes, this Florida Profit Corporation adopts the following amendment(s) its Articles of Incorporation: A. If amending name, enter the new name of the corporation: The new 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 MUST BE A STREET ADDRESS) MIAMI, FL 33131 C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX) MIAMI, FL 33131 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: PERFECT CIRCLE GROUP, P. A. 1221 BRICKELL AVE, SUITE 900 (Florida street address) MIAMI MIAMI MIAMI 33131				
(Document Number of Corporation (if known) Pursuant to the provisions of section 607.1006, Florida Statutes, this Florida Profit Corporation adopts the following amendment(s) its Articles of Incorporation: A. If amending name, enter the new name of the corporation: The new name must be distinguishable and contain the word "corporation," "company," or "incorporated" or the abbreviation "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) MIAMI, FL 33131 C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX) MIAMI, FL 33131 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: Nume of New Registered Agent PERFECT CIRCLE GROUP, OA [Florida street address] MIAMI 31131	(<u>Name</u>	of Corporation as curren	tly filed with the Florida Dept. of State)	
Pursuant to the provisions of section 607.1006, Florida Statutes, this Florida Profit Corporation adopts the following amendment(s) its Articles of Incorporation: A. If amending name, enter the new name of the corporation: The new name must be distinguishable and contain the word "corporation," "company," or "incorporated" or the abbreviation "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) SUITE 900 MIAMI, FL 33131 C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX) If amending the registered agent and/or registered office address in Florida, enter the name of the new registered Agent Name of New Registered Agent PERFECT CIRCLE GROUP, Q. Q. 1221 BRICKELL AVE, SUITE 900 (Florida street address) MIAMI MIAMI 33131	P19000003901			
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Name of New Registered Agent 1221 BRICKELL AVE, SUITE 900 (Florida street address) MIAMI 33131				CCR-U
1221 BRICKELL AVE, SUITE 900 (Florida street address) MIAMI	Name of New Registered Agent	PERFECT CIRCLE GR	A 4, 4UC	
MIAMI		1221 BRICKELL AVE, SUITE 900		i i i i i i i i i i i i i i i i i i i
MIAMI 33131		(Florida s	treet address)	,
New Registered Office Address: , Florida , Florida	New Registered Office Address:	MIAMI , Florida 33131		
(City) (Zip Code)			(City) (Zip Coa	le)
	I hereby accept the appointment as regist	200 Aoch	4	
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	

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.

X Change	<u>PT</u>	John Doe	
X Remove	<u>v</u>	Mike Jones	
X Add	<u>\$V</u>	Sally Smith	
Type of Action (Check One)	<u>Title</u>	<u>Name</u>	<u>Addres</u> s
1) Change	<u>s</u>	ELIZABETH MORTENSEN	5550 GLADES ROAD
Adđ			SUITE 200
X Remove			BOCA RATON, FL 33431
2) Change	S	RAYONDA WILLIAMS	1221 BRICKELL AVE
X Add	 		SUITE 900
Remove			MIAMI, FL 33131
3) Change			_
Add			
Remove			
4) Change	·-····	····	
Add			
Remove			
5) Change			
Add			
Remove			
6) Change			_
Add			
Remove			

If amending or adding additional Arti (Attach additional sheets, if necessary).	(Be specific)
	
<u> </u>	
<u> </u>	
provisions for implementing the amer	hange, reclassification, or cancellation of issued shares, endment if not contained in the amendment itself:
(if not applicable, indicate N/A)	

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 we document's effective date on the Department of State's records.	ill not be listed as the
Adoption of Amendment(s) (CHECK ONE)	
☐ 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)	
(voting group)	
■ The amendment(s) was/were adopted by the board of directors without shareholder action and shareholder action was not required.	
☐ The amendment(s) was/were adopted by the incorporators without shareholder action and shareholder action was not required.	
06/04/2019 Dated	
Signature Wuxabulli Halltake	<u>.</u>
(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)	
ELIZABETH MORTENSEN	
(Typed or printed name of person signing)	
SECRETARY	
(Title of person signing)	