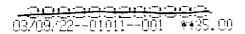
## P21000058571

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## **COVER LETTER**

**TO:** Amendment Section Division of Corporations

NAME OF CORPO	RATION: INVERSIONES D	IPALZO 2009 C.A INC				
DOCUMENT NUM	P21000058571					
The enclosed Articles	of Amendment and fee are su	bmitted for filing.				
Please return all corre	spondence concerning this ma	tter to the following:				
	LUIS EUGENIO DAVILA					
	Name of Contact Person					
	REGAL TAX & BUSINESS SOLUTIONS					
		Firm/ Company				
	1500 NW 89 COURT SUITE	106				
		Address	· · · · · · · · · · · · · · · · · · ·			
	DORAL FLORIDA 33172					
		City/ State and Zip Code	:			
	info@mis-taxes.com					
	E-mail address: (to be us	sed for future annual report	notification)			
	n concerning this matter, pleas		<b>2010310</b>			
LUIS EUGENIO DAVILA		ar ( <u>305</u>				
Name	of Contact Person	Area Coo	le & Daytime Telephone Number			
Enclosed is a check for	or the following amount made	payable to the Florida Depa	rtment of State:			
■ \$35 Filing Fee	□\$43.75 Filing Fee & Certificate of Status	S43.75 Filing Fee & Certified Copy (Additional copy is enclosed)	□\$52.50 Filing Fee Certificate of Status Certified Copy (Additional Copy is enclosed)			
Am Div P.O	iling Address endment Section ision of Corporations Box 6327 ahassec, FL 32314	Amend Division The Co 2415 N	Address ment Section n of Corporations entre of Tallahassee I. Monroe Street, Suite 810 ssee, FL 32303			

## Articles of Amendment to Articles of Incorporation of

FILED

2022 MAR -9 PM 12: 16

INVERSIONES DIPALZO 2009 C.A INC

( <u>Name</u> )	of Corporation as curren	tly filed with the Florida Dept. REState) Y OF STATE
P21000058571		TALLAHASSEE, FL
	(Document Number	of Corporation (if known)
Pursuant to the provisions of section 607, its Articles of Incorporation:	1006, Florida Statutes, thi	s Florida Profit Corporation adopts the following amendment(s) to
A. If amending name, enter the new n	ame of the corporation:	
INVERSION DIPA2009 CA INC		The new
	Corp," "Inc," or "Co".	"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 MUST BE A STREET ADDRESS)		
C. Enter new mailing address, if applicable:		N/A
(Mailing address <u>MAY BE A POST</u>	<u>OFFICE BOX</u> )	
		<del> </del>
D. If amending the registered agent ar	nd/or registered office ad	dress in Florida, enter the name of the
new registered agent and/or the new	v registered office addre	58:
Name of New Registered Agent	N/A	
	(Florida s	treet address)
New Registered Office Address:	N/A	, Florida
		(City) (Zip Code)
Non-Bosinton d America Circulation in	Landar Barbara a Arab	
New Registered Agent's Signature, if c I hereby accept the appointment as regist		ic: with and accept the obligations of the position.
	Signature of Nove	Registered Agent, if changing
	mannery men	errigation en en engle fille de la fillatigateige

Check if applicable

 $\Box$  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.

X Change	<u>PT</u>	John De	<u>oc</u>	
X Remove	<u>V</u>	Mike Jo	ones .	
X Add	<u>sv</u>	Sally Sr	<u>nith</u>	
Type of Action (Check One)	<u>Title</u>		<u>Name</u>	<u>Addres</u> s
1) Change		_	N/A	
Add				
Remove				
2) Change		_		
Add				
Remove 3 ) Change	_	_		
Add				
Remove				
4) Change	_	_		
Add				
Remove				
5) Change		_		
Add				
Remove				
6) Change		_		
Add				
Remove				

·	lditional sheets, if necessary,	). (Be specific)			
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16	1	. L		PA CHAFEC	
If an ame	endment provides for an ex	change, reclassification,	d in the amendment if	endf.	
provisio	ns for implementing the ar	mendment if not containe	d in the amendment it	self:	
provisio (if n	endment provides for an exons for implementing the arout applicable, indicate N/A)	mendment if not containe	d in the amendment it	self:	
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The date of each amendment(s)	adoption:	, if other than the
date this document was signed.		
Effective date <u>if applicable</u> :		<del></del>
	(no more than 90 days after amendment file date)	
<b>Note:</b> If the date inserted in this document's effective date on the	block does not meet the applicable statutory filing requirements, Department of State's records.	this date will not be listed as the
Adoption of Amendment(s)	( <u>CHECK ONE</u> )	
☐ The amendment(s) was/were action was not required.	dopted by the incorporators, or board of directors without sharehold	er action and shareholder
■ The amendment(s) was/were a by the shareholders was/were	dopted by the shareholders. The number of votes east for the amend sufficient for approval.	lment(s)
	pproved by the shareholders through voting groups. The following sor each voting group entitled to vote separately on the amendments	
"The number of votes ea	st for the amendment(s) was/were sufficient for approval	
by		
	(voting group)	
selec	director, president or other officer – if directors or officers have not yed, by an incorporator – if in the hands of a receiver, trustee, or other	
appo	inted fiduciary by that fiduciary)	
	ROBERT ENRIQUE RODRIGUEZ DURAN	
	(Typed or printed name of person signing)	
	PRESIDENT	
	(Title of person signing)	