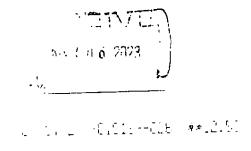
P2000090522

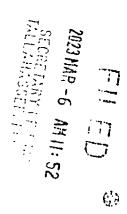
(Requestor's Name)
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(City/State/Zip/Phone #)
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(Document Number)
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COVER LETTER

TO: Amendment Section
Division of Corporations

NAME OF CORPORATI	ON:	PERUSA NATURAL COR	P		
P17000093787					
The enclosed Articles of Art	nendment and fee are su	bmitted for filing.			
Please return all correspond	ence concerning this ma	tter to the following:			
		YANET COMESANAS			
	Name of Contact Person				
	VGV (US) LLC				
	Firm/ Company				
	2100 PONCE DE LEON, SUITE 850				
	Address				
	CORAL GABLES, FL 33134				
		City/ State and Zip Code	:		
	у	anete@vivancoyvivanco.co	om		
	E-mail address: (to be us	ed for future annual report	notification)		
For further information con	cerning this matter, pleas	se call:			
YANET COMESANAS		at (_)		
Name of Co	ntact Person	Area Coo	le & Daytime Telephone Number		
Enclosed is a check for the	following amount made	payable to the Florida Depa	irtment of State:		
S35 Filing Fee	S43.75 Filing Fee & Certificate of Status	☐S43.75 Filing Fee & Certified Copy (Additional copy is enclosed)	S52.50 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		Amend Divisio The Co	Address ment Section n of Corporations entre of Tallahassee J. Monroe Street, Suite 810		

Tallahassee, FL 32303

Articles of Amendment Articles of Incorporation of



ANIII.S. JETS TIME CORP (Name of Corporation as currently filed with the Florida Dept. of State)

P20000090522

nt(s) to

	(Document Number o	f Corporation (if known)
Pursuant to the provisions of section 607, its Articles of Incorporation:	1006, Florida Statutes, this	Florida Profit Corporation adopts the following amendme
A. If amending name, enter the new na	ame of the corporation:	
		The _new
	lorp," "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: (Principal office address <u>MUST BE A STREET ADDRESS</u>)		2100 Ponce de Leon, Blvd., Suite 850
		Coral Gables, Florida - 33134
C. Enter new mailing address, if appl (Mailing address MAVRE A POST		2100 Ponce de Leon, Blvd., Suite 850
(Mailing address <u>MAY BE A POST OFFICE BOX</u>)		Coral Gables, Florida - 33134
D. If amending the registered agent are new registered agent and/or the new Name of New Registered Agent		
	(Florida st	reet address)
New Registered Office Address:	2100 Ponce de Leon, Blvo	I. Suite 850, Coral Gables Florida 33134
the segments of the same con-	(City) (Zip	
New Registered Agent's Signature, if of thereby accept the appointment as registered.	ered agent. I am familiar	with and accept the obligations of the position.
	Signature of Yew F	egistered 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)

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	
\underline{X} Remove	<u>v</u>	Mike Jones	
X Add	<u>SV</u>	Sally Smith	
Type of Action (Check One)	<u>Title</u>	<u>Name</u>	<u>Addres</u> s
1) Change			
Add			· · · · · · · · · · · · · · · · · · ·
Remove			
2) Change		_	
Add			
Remove 3) Change			
Add			
Remove			
4) Change		_	
Add			
Remove			
5) Change			
Add			
Remove			
6) Change			
Add			
Remove			

Attach additional sheets, if necessary).	icles, enter change(s) here: (Be specific)
	<u> </u>
	
	-
·	
f an amendment provides for an excl	hange, reclassification, or cancellation of issued shares.
(if not applicable, indicate N/A)	endment if not contained in the amendment itself:
(i) not appreciate, naticale (5.11)	
	
	

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The date of each amendment(s) ac	loption:	, 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 b document's effective date on the De	lock does not meet the applicable statutory filing requirements, this partment of State's records.	date will not be listed as the
Adoption of Amendment(s)	(<u>CHECK ONE</u>)	
The amendment(s) was/were add action was not required.	pted by the incorporators, or board of directors without shareholder a	ction and shareholder
☐ The amendment(s) was/were add by the shareholders was/were su	pted by the shareholders. The number of votes cast for the amendmental flicient for approval.	nt(s)
	roved by the shareholders through voting groups. The following state each voting group entitled to vote separately on the amendment(s):	rment
"The number of votes cast	for the amendment(s) was/were sufficient for approval	
by		
-	(voting group)	
2-13-2023 Dated		
selecte	rector, presidentor other officer if directors or officers have not been an incorporator — if in the hands of a receiver, trustee, or other control of the fiduciary by that fiduciary)	en ourt
арропп	CARLOS JAVIER FIALLO	
	(Typed or printed name of person signing)	
	REGISTERD AGENT	
	(Title of person signing)	