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COVER LETTER

TO: Amendment Section Division of Corporations

NAME OF CORPOR	eation: Havana	Ford Inc		- -
DOCUMENT NUMB	2==11.1			_
	of Amendment and fee are sub	mitted for filing.		
Please return all corres	spondence concerning this matt	ter to the following:		
	Ja A. Va	inp	<u></u>	
		Name of Contact Person	1	
	+twena }	ord Inc		
	PO BOX 5	Firm/ Company	5. Main	ST
	Howara		333	
	E-mail address: (to be us	City/ State and Zip Cod cod for future annual report	notification)	
Len B	on concerning this matter, pleas	ai (SCO	545 - 1350 , 554 (650) ode & Daytime Telephone	Number
	of Contact Person or the following amount made			10110004 \$105.
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)	Greviously enclosed with incorrect Docs

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
Tailuhassee, FL 32301

Articles of Amendment to Articles of Incorporation of

Havana Foro Inc.	
(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 <i>Florida Profit Corporation</i> adopts the staticles of Incorporation:	following amendment(s) to
4. If amending name, enter the new name of the corporation:	
name must be distinguishable and contain the word "corporation," "company," or "incorporated" of	The new
name must be distinguishable and contain the word corporation. "Corp" "Inc" or Co" or the designation "Corp." "Inc." or "Co" 4 professional corporation nan word "chartered," "professional association." or the abbreviation "P.4" B. Enter new principal office address, if applicable: (Principal office address MUST BE A STREET ADDRESS)	ne must contain the
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)	19 JU
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:	
Name of New Registered Agent Son S. Main ST Hawara F. (Florida street address) Florida	23336 222 22336 222 22336 2236 2236 22336 2236 22336 22336 22336 22336 22336 22336 22336 2236 2236 2236 2236 2236 2236 2236 2236 2236 2236 2236 2236 2236 2236 2236 2236 2236
New Registered Office Address: _N/A (City)	(Zip Code)
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 Signature of New Registered Agent, if changing	position.

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.

Francisco Contractor			
Example: X_Change	<u>PT</u> <u>John</u>	<u>Doe</u>	
X Remove	<u>V</u> <u>Mike</u>	<u>Jones</u>	
X Add	<u>SV</u> <u>Saily</u>	<u>Smith</u>	
Type of Action	<u>Title</u>	Name	<u>Address</u>
(Check One) 1) Change	P	Clive Ball Jr	302 SMOUNST - +6401010 FZ 3233
Add Remove 2) Change	P	Kenneth D Ball	301 5 mainst Howara FI 32333
Add Remove 3) Change Add	ST	Joy A. Younts	302 S MEDIST
Remove 4) Change Add Remove			PH 2: 22
3) Change Add			
Remove 6) Change Add			
Remove			

If an amendment provides for an exchange, reclassification, or cancellation of issued shares. Provisions for implementing the amendment if not contained in the amendment itself:	. If amending or adding additional Articles, enter change(s) here: (Attach additional sheets, if necessary). (Be specific)			
If an amendment provides for an exchange, reclassification, or cancellation of issued shares. Provisions for implementing the amendment if not contained in the amendment itself: (if for applicable, indicate N/A) A 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2	(Allach diddlional sneets, if necessary).			
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The date of each amendment(s) adoption:	if other than the
date this document was signed.	
Effective date if applicable:	
Note: If the date inserted in this block does not meet the applicable statutory filing requirements, this date wi document's effective date on the Department of State's records.	il not be listed as the
Adoption of Amendment(s) (CHECK ONE)	
The amendment(s) was/were adopted by the shareholders. The number of votes east 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)	
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.	
Dated 7-2-2019)	
Signature (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)	19 JUL -3
(Typed or printed name of person signing)	PH 2
(Title of person signing)	22