66/626

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10/29/24--01013--020 **27.00

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COVER LETTER

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TO: Amendment Section Division of Corporations

NAME OF CORPO	ORATION: SHIBULING		
DOCUMENT NUM			
	s of Amendment and fee are su	bmitted for filing.	
Please return all corr	espondence concerning this ma	tter to the following:	
	ANTOLIN PESTANO		
	***	Name of Contact Person	1
	BSSN CORP		
		Firm/ Company	<u> </u>
	4612 N HIATUS RD		
		Address	
	SUNRISE, FLORIDA 33351		
		City/ State and Zip Code	
	tony.pestano@bssnusa.com		
	E-mail address: (to be us	sed for future annual report	notification)
For further informati	on concerning this matter, pleas	se call:	
ANTOLIN PESTANO		at (578-0016
Name of Contact Person		Area Co	de & Daytime Telephone Number
Enclosed is a check f	or the following amount made	payable to the Florida Depa	artment of State:
S35 Filing Fee	☐\$43.75 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)
An Div P.C	niling Address nendment Section vision of Corporations D. Box 6327 llahassee, FL 32314	Amend Divisio The Co 2415 ?	Address Iment Section In of Corporations Entre of Tallahassee V. Monroe Street, Suite 810 Issee, F1, 32303

Articles of Amendment to Articles of Incorporation of



SHIBUI INC	29 PH 4
(Name of Corporation 661626	as currently filed with the Florida Dept. of State VALLARASSEE, FLOR
	t Number of Corporation (if known)
Pursuant to the provisions of section 607.1006, Florida St its Articles of Incorporation:	catutes, this Florida Profit Corporation adopts the following amendment(s) to
A. If amending name, enter the new name of the corp	oration:
	The new
name must be distinguishable and contain the word "corpo" Inc., " or Co.," or the designation "Corp," "Inc," o "chartered," "professional association," or the abbrevia	oration," "company," or "incorporated" or the abbreviation "Corp.," or "Co". A professional corporation name must contain the word attion "P.A."
B. Enter new principal office address, if applicable: (Principal office address MUST BE A STREET ADDRE	ESS)
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)	office address in Florida, enter the pump of the
D. If amending the registered agent and/or registered new registered agent and/or the new registered offi	
Name of New Registered Agent	
	(Florida street address)
New Registered Office Address:	. Florida
	(City) (Zip Code)
	m familiar with and accept the obligations of the position.
Signatur	re of New Registered 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	PT	John Doe		
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	SD	ANTONIO MOTOSONO	11899 SW 72 TE	
Add			MIAMI, FL 33183	
X Remove 2) Change	VPD	LUIS NAKANDAKARI	10141 SW 72ND STREET	
X Add			MIAMI, FL 33173	
Remove Change				
Add				
Remove				
4) Change				
Add				
Remove				
5) Change				
Add				
Remove				
6) Change				
Add				
Remove				

f 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 not applicable, indicate NA)	
provisions for implementing the amendment if not contained in the amendment itself:	
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provisions for implementing the amendment if not contained in the amendment itself:	
(if not applicable, indicate N/A)	
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The date of each amendment(s) adoptic	on:	, 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 of document's effective date on the Departm	does not meet the applicable statutory filing requirements, this date we nent of State's records.	ill not be listed as the
Adoption of Amendment(s)	(<u>CHECK ONE</u>)	
■ The amendment(s) was/were adopted to action was not required.	by the incorporators, or board of directors without shareholder action as	nd shareholder
by the shareholders was/were sufficient		202
	by the shareholders through voting groups. The following statement voting group entitled to vote separately on the amendment(s): e amendment(s) was/were sufficient for approval	FILED 2024 OCT 29 PM 4: 34
"The number of votes east for the	e amendment(s) was/were sufficient for approval	29 1
by	(voting group)	P 0
	(voling group)	ξ. ξ. ω
Dated	5	Dr. F
Signature 4	Tablo Cleuma	_
(By a director	, president or other officer of directors or officers have not been	
	an incorporator – if in the hands of a receiver, trustee, or other court	
appointed fid	uciary by that fiduciary)	
	Gallo Clyma Pablo Ug	18MA
	(Typed or printed name of person signing)	
	ResidenT	<u></u>
	(Title of person signing)	