## KZ1402

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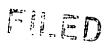
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## COVER LETTER

TO: Amendment Section Division of Corporations

NAME OF CORPORA	ATION: PEGASO, CORP.				
DOCUMENT NUMBE					
The enclosed Articles of	f Amendment and fee are su	bmitted for filing.			
Please return all corresp	ondence concerning this ma	tter to the following:			
		ALICIA GARCIA			
-	Name of Contact Person				
	PEGASO, CORP.				
_	Firm/ Company				
	555 NE 15th STREET SUITE 100				
_	Address				
	MIAMI, FLORIDA 33132				
		City/ State and Zip Cod	e e		
	AGA	RCIA@PEGASOCORP.C	COM		
_	E-mail address: (to be us	sed for future annual report	notification)		
For further information	concerning this matter, plea	se call:			
ALICIA GARCIA		305	576-7800		
Name of	Contact Person	Area Co	de & Daytime Telephone Number		
Enclosed is a check for	the following amount made				
■ \$35 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)		
Mailing Address Amendment Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314		Street Address Amendment Section Division of Corporations The Centre of Tallahassee 2415 N. Monroe Street, Suite 810 Tallahassee, FL 32303			

## Articles of Amendment to Articles of Incorporation of



PEGASO, CORP.	2021 MAP 25 ALL T		
(Name of Corporat	ion as currently filed with the Florida Dept. of State 7: 49		
K21402	(Document Number of Corporation (if known) LOTASSEE, FL		
(Docu	ment Number of Corporation (if known) - CITAOSEE, FL		
Pursuant to the provisions of section 607.1006, Floridits Articles of Incorporation;	la Statutes, this <i>Florida Profit Corporation</i> adopts the following amendment(s) to		
A. If amending name, enter the new name of the c	corporation:		
	The new		
name must be distinguishable and contain the word "c "Inc.," or Co.," or the designation "Corp," "Inc. "chartered," "professional association," or the abbr	corporation," "company," or "incorporated" or the abbreviation "Corp.," ," or "Co", A professional corporation name must contain the word eviation "P,A,"		
B. Enter new principal office address, if applicable (Principal office address <u>MUST BE A STREET AD</u>			
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BO	<u>DX</u> )		
D. If amending the registered agent and/or registered new registered agent and/or the new registered	ered office address in Florida, enter the name of the Loffice address:		
Name of New Registered Agent	·		
	(Florida street address)		
New Registered Office Address:	, Florida		
	(City) (Zip Code)		
New Registered Agent's Signature, if changing Re I hereby accept the appointment as registered agent.	gistered Agent: I am familiar with and accept the obligations of the position		
The state of the s			
Sign	nature 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	<u>PT</u>	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) X Change	P	Francisco M Martinez-Miyashiki	555 NE 15th Street Suite 100	
Add			Miami, F1 33132	
Remove				
2) X Change	D	Francisco Martinez-Celeiro	555 NE 15th Street Suite 100	
Add			Miami, Fl 33132	
Remove 3 ) Change				
Add			<del></del>	
Remove				
4) Change				
Add				
Remove				
5) Change				
Add				
Remove				
6) Change				
Add				
Remove				

E. <u>If amending or</u> (Attach addition	adding additional Ar nal sheets, if necessary).	ticles, enter chang	<u>(e(s) here</u> :		
N/A	an arresting of the extension for	· · · · · · · · · · · · · · · · · · ·			
		- <del></del>			
		<del>_</del> -		<del>-</del>	
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			-		
P vs 1					
r. 11 an amendme provisions for	ent provides for an exc implementing the am	rnange, reclassing endment if not co	ation, or cancellati ntained in the ame	on of issued shares, endment itself:	
(if not app	licable, indicate N/A)				
N/A					
-					
					,
· · · · · ·				<del></del>	

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The date of each amendment(s) a	03/22/2021 doption:	, if other than the
date this document was signed.		
Effective date <u>if applicable</u> :		
	(no more than 90 days after amendmer	nt file date)
Note: If the date inserted in this blocument's effective date on the D	plock does not meet the applicable statutory filing repartment of State's records.	equirements, this 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.	opted by the incorporators, or board of directors with	out shareholder action and shareholder
☐ The amendment(s) was/were add by the shareholders was/were so	opted by the shareholders. The number of votes cast afficient for approval.	for the amendment(s)
	proved by the shareholders through voting groups. To each voting group entitled to vote separately on the	
	for the amendment(s) was/were sufficient for approx	ral
by	(voting group)	<u>.</u> .
	(voting group)	
03/22/2021 Dated		
Signature		
selecte	irector, president or other officer – if directors or off d, by an incorporator – if in the hands of a receiver, t ted fiduciary by that fiduciary)	
	Franicisco M Martinez-Miyashiki	
	(Typed or printed name of person signing	<u>g)</u>
	President	
	(Title of person signing)	