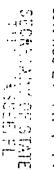
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COVER LETTER

TO: Amendment Section Division of Corporations

NAME OF CORPO	RATION: AUGUSTAN COI	₹P			
DOCUMENT NUM					
The enclosed Articles	of Amendment and fee are su	bmitted for filing.			
Please return all corre	spondence concerning this ma	tter to the following:			
	RODOLFO C BELLOSO				
		Name of Contact Person	n		
	AUGUSTAN CORP				
		Firm/ Company			
	671 W 18TH STREET				
		Address			
	HIALEAH, FL 33010				
		City/ State and Zip Cod	e		
			,		
	BARRO@TEVEC	O.com	/		
·	E-mail address: (to be us	sed for future annual report	notification)		
For further informatio	n concerning this matter, pleas	se cail:			
PEDALAMAO D. DOM	Spicitin	205	171 1700		
FERNANDO R. ROI		at (373-3799 		
Name	of Contact Person	Area Co	de & Daytime Telephone Number		
Enclosed is a check fo	or the following amount made	payable to the Florida Depa	artment of State:		
■ \$35 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)		
<u>Ma</u>	iling Address	Street	Address		
Am	endment Section	Amendment Section			
	ision of Corporations	Division of Corporations			
	. Box 6327		Clifton Building		
Tall	ahassee, FL 32314	2661 Executive Center Circle			
		Tallahassee, FL 32301			

Articles of Amendment Articles of Incorporation of

Αſ	TZI	$A \setminus I$	$C \cap$	בו כו

(Name o	of Corporation as curren	itly filed with the Florida Den	t. of State)		
K75574					
	(Document Number	of Corporation (if known)			
Pursuant to the provisions of section 607. its Articles of Incorporation:	1006, Florida Statutes, thi	is Florida Profit Corporation a	dopts the followi	ng amend	ment(s)
A. If amending name, enter the new na	ame of the corporation:				
NOT APPLICABLE				The n	
name must be distinguishable and con "Corp.," "Inc.," or Co.," or the design word "chartered," "professional associa	nation "Corp," "Inc," or	"Co". A professional corpor		<u>ab</u> breviat	ion
R. Enter new principal office address	if applicable.	671 W 18TH STREET			
B. Enter new principal office address, if applicable: (Principal office address MUST BE A STREET ADDRESS)		HIALEAH, FL 33010			
			ر. - ا	2019	
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)		671 W 18TH STREET		ID AUG 2	
		HIALEAH, FL 33010	A		THE
			1 / 1 / 1 / 1 / 1 / 1 / 1 / 1 / 1 / 1 /	대 및 기 나	
D. If amending the registered agent an new registered agent and/or the new			me of the	計	
Name of New Registered Agent	FERNANDO R. RODRI	GUEZ			
	671 W 18TH STREET			_	
	(Florida s	street address)		_	
New Registered Office Address:	HIALEAH		. Florida 33010		
The state of the s		(City)	-, · · · · · · · · · · · · · · · · · · ·	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 position.

Signature of New Registered Agent, if changing

If amending the Officers and/or Directors, enter the title and name of each officer/director being removed and title, name, a 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 = Ch. Executive Officer; CFO = Chief Financial Officer. If an officer/director holds more than one title, list the first letter of each off 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 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 Chang Mike Jones, V as Remove, and Sally Smith, SV as an Add.

Example: X Change	<u>b.L</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) Change		NOT APPLICABLE	
Add			
Remove			
2) Change			
Add			
Remove			
3) Change	_		
Add			
Remove			
4) Change			
Add			
Remove			
5) Change			 -
Add			
Remove			
6) Change	<u> </u>		
Add			
Remove			

E. If amending or adding add (Attach additional sheets, if					
NOT APPLICABLE					
				 .	
·				······ -	<u>. </u>
					
·			••		
					
		·			
				-	
	 				
F. If an amendment provides	for an exchange, recl	assification, or can	cellation of issued s	hares	
provisions for implement	ing the amendment if	not contained in th	e amendment itself	<u>:</u>	
(if not applicable, indi	cate N/A)				
NOT APPLICABLE		<u></u>			
					_
				_	
				-	 _
				_	<u> </u>

	AUGUST 16, 2019	
The date of each amendment(s) a	doption:	, if other than
date this document was signed.	(A) (A) (A) (A)	
AU Effective date <u>if applicable</u> :	GUST 16, 2019	
Effective date <u>it applicable</u> .	(no more than 90 days after amendment file date)	
Note: If the date inserted in this document's effective date on the D	block does not meet the applicable statutory filing requirements, this date epartment of State's records.	will not be listed as
Adoption of Amendment(s)	(CHECK ONE)	
The amendment(s) was/were ad by the shareholders was/were s	opted by the shareholders. The number of votes cast for the amendment(s) ufficient for approval.	
	proved by the shareholders through voting groups. The following statemer reach voting group entitled to vote separately on the amendment(s):	ıt
"The number of votes cas	t for the amendment(s) was/were sufficient for approval	
by NOT APPLICABLE		
	(voting group)	
action was not required.	opted by the board of directors without shareholder action and shareholder	
☐ The amendment(s) was/were ad action was not required.	opted by the incorporators without shareholder action and shareholder	
Dated Signature	16, 2019	
select	director, president or other officer – if directors or officers have not been ed by an incorporator – if in the hands of a receiver, trustee, or other court inted fiduciary by that fiduciary)	
	RODOLFO C BELLOSO	
	(Typed or printed name of person signing)	
	PRESIDENT	
	(Title of person signing)	