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COVER LETTER

TO: Amendment Section
Division of Corporations

NAME OF CORPORATION: Community Builders International Inc
DOCUMENT NUMBER: <u>N1900002026</u>
The enclosed Articles of Amendment and fee are submitted for filing.
Please return all correspondence concerning this matter to the following:
Luis Tupacyuparqui (Name of Contact Person)
Community Builders International Inc (Firm/Company)
919 NW 2nd AV STE 611 (Address)
Miami, FL 33136 (City/ State and Zip Code)
Ignacio a Community builders intl. com E-mail address: (to be used for future annual report notification)
For further information concerning this matter, please call:
Wis Tupacyupangui at 305 - 773 - 8066 (Name of Contact Person) (Area Code) (Daytime Telephone Number)
Enclosed is a check for the following amount made payable to the Florida Department of State:
\$\square\$\square\$\$\$\$43.75 \text{ Filing Fee & Certificate of Status}\$\$\$Certificate of Status (Additional copy is enclosed) \$\square\$
Mailing Address Amendment Section Street Address
Division of Corporations Amendment Section

Amendment Section Division of Corporations P.O. Box 6327 Tallahassec, FL 32314

Amendment Section
Division of Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, FL 32301

Articles of Amendment to Articles of Incorporation of

Community Builde	rs International Inc
traine of Corporation as curren	ntly filed with the Florida Dept. of State)
N19000002	026
	er of Corporation (if known)
Pursuant to the provisions of section 617.1006. Florida Statute amendment(s) to its Articles of Incorporation:	es, this Florida Not For Profit Corporation adopts the following
A. If amending name, enter the new name of the corporati	ion:
name must be distinguishable and contain the word "corporat" "Company" or "Co." may not be used in the name.	ion" or "incorporated" or the abbreviation "Corp." or "Inc."
B. Enter new principal office address, if applicable: (Principal office address MUST BE A STREET ADDRESS)	919 NW 2nd Av Ste 611
THE CHAPTES WOST BE A STREET ADDRESS	Miami, FL 33/36
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)	919 NW 2nd AV Ste 6/P = 5
	919 Nw 2nd Av Ste 6/P3 5 5 7 7 19 19 19 19 19 19 19 19 19 19 19 19 19
	نسن شم
D. If amending the registered agent and/or registered office new registered agent and/or the new registered office ad	address in Florida, enter the name of the dress:
Name of New Registered Agent:	;::
9	19 NW 2nd Av STE 611
New Registered Office Address:	(Florida street address)
	1iami
ew Registered Apant's Signature is the same	(City) (Zip Code)
lew Registered Agent's Signature, if changing Registered A hereby accept the appointment as registered agent. I am fami	gent: liar with and accept the obligations of the position.
Sign	vature 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, 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.

Example: X Change X Remove X Add	<u>V</u> <u>Mi</u>	hn Doe ike Jones Ily Smith	
Type of Action (Check One)	<u>Title</u>	<u>Name</u>	<u>Addres</u> s
1) Change Add Remove	P	Luis Tupacyupangui	919 NW 2nd Av Ste 6 Hiami, FL 33136
2) Change Add Remove	<u>vP</u>	Ivonne tamayo	919 NW 2nd AV Stebl Miami, FL 33136
3) Change Add Remove	TR	David Mariduena	919 NW 2nd Av Se 611 Hiami, FL 33136
4) Change Add Remove	·		
5) Change Add Remove			
6) Change Add Remove			

If amending or adding a attach additional sheets.	Iditional Articles, ente fnecessary). (Be spec	r change(s) here:		
NIA		,		
- N/A		<u></u>		
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The date of each amendment(s) adopted date this document was signed.	——————————————————————————————————————	, if other than the
Effective date if applicable:	June 14th 2019	- west than the
Note: If the date inserted in this block d document's effective date on the Departr	(no more than 90 days after amendment file date) oes not meet the applicable statutory filing requirements, this date will not be nent of State's records.	listed as the
Adoption of Amendment(s)	(CHECK ONE)	
The amendment(s) was/were adopte was/were sufficient for approval.	d by the members and the number of votes cast for the amendment(s)	
There are no members or members e adopted by the board of directors.	ntitled to vote on the amendment(s). The amendment(s) was/were	
DatedJune	, 14 th 2019	
Signature (By the chairman o have not been sele other court appoin	r view chairman of the board president or other officer-if directors cted, by an incorporator – if in the hands of a receiver, trustee, or ted fiduciary by that fiduciary)	
	Luis Tupacyupangui (Typed or printed name of person signing)	
	President (Title of person signing)	