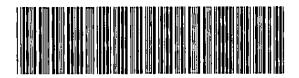
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COVER LETTER

TO: Amendment Section Division of Corporations

OHNUSA IN NAME OF CORPORATION:	C 		<u> </u>
N19000007997 DOCUMENT NUMBER:			
The enclosed Articles of Amendment and fee a			
Please return all correspondence concerning th	s matter to the following:		
SANCHEZ, BRAYAM S			
	(Name of Contact I	Person)	
OHNUSA INC			
	(Firm/ Compar	ny)	
1701 S Alexander St Suite 103			
	(Address)		_
Plant City, FL 33566			
	(City/ State and Zip	Code)	
ohnusanonprofitfl@gmail.com			
E-mail address: (to b	be used for future annual re	eport notification	n)
For further information concerning this matter.	please call:		
ohnusanonprofitfl@gmail.com	q	239 t	271-0415
(Name of Contact			(Daytime Telephone Number)
Enclosed is a check for the following amount n	nade payable to the Florida	Department of	State:
■ \$35 Filing Fee □\$43.75 Filing F Certificate of \$	ee & □\$43.75 Filing Fee tatus Certified Copy (Additional copy enclosed)	Certifi is Certifi	D Filing Fee icate of Status ied Copy tional Copy is used)
Mailing Address Amendment Section	A	treet Address mendment Secti	

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

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

(Name of Corporation as currently filed with the Florida	a Dept. of State)		
(Document Nun	nber of Corporation (if known)		-
Pursuant to the provisions of section 617.1006, Florida Statt amendment(s) to its Articles of Incorporation:	utes, this Florida Not For Profit	Corporation adopts	the following
A. If amending name, enter the new name of the corpor	ation:		
OHNUSA INC			The new
name must be distinguishable and contain the word "corpor" (Company" or "Co." may not be used in the name.	ration" or "incorporated" or the	abbreviation "Corp	
B. Enter new principal office address, if applicable:	1701 S Alexander St		
(Principal office address MUST BE A STREET ADDRES.	S) Plant City FL 33566		
	Ste 103		
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)	1701 S Alexander St		
	Plant City FL 33566		
	Ste 103		
D. If amending the registered agent and/or registered of new registered agent and/or the new registered office Name of New Registered Agent:		ne name of the	
	(Florida stree	rt address)	
New Registered Office Address:			
	(City)	, Florida (Zip Code)	
New Registered Agent's Signature, if changing Registere I hereby accept the appointment as registered agent. I am j		gations of the positio	
	Signature of New Registered Age	mt if changing	92.
•	ыунашге ор New Kegisterea Age	m, y changing	
			792 T 12 PX
			πα 7.4
			??

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 Y John Doe X Remove Y Mike Jones X Add SV Sally Smith	and address of (Attach addition of Please note the Persident, Executive Office)	f each Officer and onal sheets, if neces e officer/director til V= Vice Presiden	Nor Director being added: ssary) tle by the first letter of the op t; T= Treasurer; S= Secreta Financial Officer. If an offic	ffice title: ry; D= Director; TR= Tr	r/director being removed and title, name, rustee: C = Chairman or Clerk; CEO = Chief nan one title, list the first letter of each office
X Change PT John Doe X Remove V Mike Jones	a change, Mike	g Jones leaves the c	orporation, Sally Smith is n		
	<u>X</u> Change <u>X</u> Remove	<u>PT</u> <u>Y</u> <u>SV</u>	Mike Jones		
Type of Action Title Name Address (Check One)		<u>Title</u>	<u>Name</u>		<u>Addres</u> s
1) Change		<u></u>			
Remove	Remo	ove			-
2) Change Add					
Remove	Add				
4) Change		<u></u>			
Remove	Remo	ove			
5) Change		<u></u>			
Remove	Remo	ove			
6) Change		<u></u>	_		
Remove	Remo	ove			
E. If amending or adding additional Articles, enter change(s) here: (attach additional sheets, if necessary). (Be specific)				<u>e(s) here</u> :	
ARTICLE IX Upon the dissolution of this organization, assets shall be distributed for one or more exempt purposes	ARTICLE IX	Upon the dissolution	on of this organization asset	s shall be distributed for a	one or more exempt purposes
within the meaning of section 501(c)(3) of the Internal Revenue Code, or corresponding section of any					

future federal tax code, or shall be distributed to the federal government, or to a state or local government,

for a public purpose

ARTICLE X		
The organization is organized exclusion	sively for charitable, religious, educational, and scientific purposes under	
section 501(c)(3) of the Internal Rev	renue Code, or corresponding section of any future federal tax code.	
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·		
The date of each amendment(s) ad late this document was signed.	08/06/2021 option:	, if other than t
Effective date <u>if applicable</u> : 08/07	7/2021	
	(no more than 90 days after amendment file date)	
Sote: If the date inserted in this block locument's effective date on the Dep	ck does not meet the applicable statutory filing requirements, this date will not partment of State's records.	be listed as the
Adoption of Amendment(s)	(CHECK ONE)	

There are no members or members entitled to vote on the amendment(s). The amendment(s) was/were adopted by the board of directors.
Dated 08/06/2021
Signature (By the chairman of vice chairman of the board, president or other officer-if director have not been selected, by an incorporator (f in the hands of a receiver, trustee, or other court appointed fiductary by that fiduciary)
SANCHEZ, BRAYAM S
(Typed or printed name of person signing)
VICEPRESIDENT

(Title of person signing)