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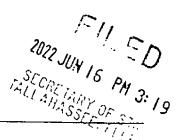
TO: Amendment Section Division of Corporations

NAME OF CORPORATIO	CARBONDIVEST N:				
DOCUMENT NUMBER: _	120KXXXXXXX				
			·····		_
The enclosed Articles of Ame	numeni and tee are sur	omitted for tiling.			
Please return all corresponder	ive concerning this mat	ter to the following:			
LUZ STELLA MANTILLA					
		(Name of Contact Pe	erson)		
CARBONDIVEST ORGING					
		(Firm/ Company	,`)		_
950 BRICKELL BAY DRIV	E, STE # 2910				
		(Address)			_
MIAMI FL 33131					
	***************************************	(City/ State and Zip	Code)		
apple3512@outlook.com					
E-r	nail address: (to be use	d for future annual rep	ort notification	n)	
For further information conce	rning this matter, please	e caff:			
LUZ STELLA MANTILLA		वा	561	293-0612	
()	Same of Contact Person	1)	(Area Code)	(Daytime Telephone Number)	
Enclosed is a check for the fol	lowing amount made p	ayable to the Florida !	Department o	f State:	
□ \$35 Filing Fee	\$43.75 Filing Fee & Certificate of Status	☐\$43.75 Filing Fee Certified Copy (Additional copy is enclosed)	Certi s Certi (Add	50 Filing Fee ficate of Status fied Copy itional Copy is osed)	
Mailing Ad	dress	Str	eet 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



CARBONDIVEST ORGING (Name of Corporation as currently filed with the Florida Dept. of State) N20000005774 (Document Number of Corporation (if known) Pursuant to the provisions of section 617,1006. Florida Statutes, this Florida Not For Profit Corporation adopts the following amendment(5) to its Articles of Incorporation: A. If amending name, enter the new name of the corporation: name mass be distinguishable and contain the word "corporation" or "incorporated" or the abbreviation "Corp." or "Inc." "Company" or "Co," may not be used in the name. 950 BRICKELL BAY DRIVE B. Enter new principal office address, if applicable: (Principal office address MUST BE A STREET ADDRESS) STE # 2910 MIAMLEL 33131 C. Enter new mailing address, if applicable: 950 BRICKELL BAY DRIVE (Mailing address MAY BE A POST OFFICE BOX) STE # 2910 MIAMI FL 33131 D. If amending the registered agent and/or registered office address in Florida, enter the name of the new registered agent and/or the new registered office address: Name of New Registered Agent: (Florida street address) New Registered Office Address: Florida (Cirv) 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, 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. Its 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>Mik</u>	n Doe te Jones v Smith	
Type of Action (Check One)	Title	<u>Name</u>	Address
1) Change Add	<u>1)</u>	ROBESON SACKS SUZANNE	3901 NW 79TH AVE STE 245 #14 MIAMI FL 33166
2) * Change Add	<u>b</u>	ESTUPINAN MARIA TERESA	479 NE 30TH STREET, APT #407 MIAMI FL 33173
Remove			
4) Change Add			
Remove			
6) Change Add			
E. <u>If amending or addi</u> (wisch additional she	ng additional A els, if necessary)	rticles, enter change(s) here: . (Be specific)	

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				···-				
The date	date of each amendmen this document was signed	t(s) adoption i.	:	·				, if other than the
F. ffe	ctive date <u>if applicable</u> :	06/09/2022						
		()	no more than 4) days ofter un	nendmeni fil	e date)		
<u>Not</u> doci	$\frac{1}{2}$ If the date inserted in the interest is effective date on t	his block does he Departmer	not meet the ap	oplicable statu ords.	tory filing re	equirements,	this date will no	t be listed as the
Ada	ption of Amendment(s)	ı	CHECK ONE)				
	The amendment(s) was/www.was/were sufficient for ap	vere adopted b pproval.	y the members	and the numb	er of votes c	east for the ar	mendment(s)	

, here are no members or members entitled to vote on the amendment(s). The amendment(s) was/were adopted by the board of directors.
Dated 06/04/2022
Signature (By the chairman or vice chairman of the board, president or other officer-if directors have not been selected, by an incorporator – if in the hands of a receiver, trustee, or other court appointed fiduciary by that fiduciary)
LUZ STELLA MANTILLA
(Typed or printed name of person signing)
DIRECTOR

(Title of person signing)