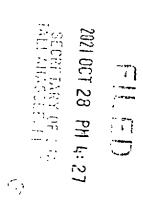
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COVER LETTER

TO: Amendment Section

Division of Corporations

NAME OF CORPORATION: <u> 20000</u>012005 DOCUMENT NUMBER: The enclosed Articles of Amendment and fee are submitted for filing. Please return all correspondence concerning this matter to the following: ADRIAN HERNANDEZ
(Name of Contact Person) D65 Pro Inc.
(Firm/Company) 549 CAREY WAY ORLY
(Address) ORLANDO, FL 32825
(City/ State and Zip Code) THE DU QUECTTO @ GMAIL. COM
E-mail address: (to be used for future annual report notification) For further information concerning this matter, please call: ANTHORN DEMELS at ZØ1 679 Ø519
(Name of Contact Person) (Area Code) (Daytine Telephone Number) Enclosed is a check for the following amount made payable to the Florida Department of State: X\$35 Filing Fee □\$43.75 Filing Fee & □\$43.75 Filing Fee & □\$52.50 Filing Fee Certificate of Status Certified Copy Certificate of Status Certified Copy (Additional copy is (Additional Copy is enclosed) Enclosed) Street Address Mailing Address Amendment Section Amendment Section Division of Corporations Division of Corporations The Centre of Tallahassee P.O. Box 6327 2415 N. Monroe Street, Suite 810 Tallahassee, Fl. 32314

Tallahassee, FL 32303

Articles of Amendment to Articles of Incorporation

FILED

D65 PRO Incorporation	D.	2021 OCT 28 PH 4: 27
Name of Corporation as currently filed with the F	lorida Dept, of State)	SEPtime
N20000012005)	FALLAHAS OFF THE
	t Number of Corporation (if ki	nown)
Pursuant to the provisions of section 617,1006, Florida amendment(s) to its Articles of Incorporation:	a Statutes, this Florida Not Fo	r Profit Corporation adopts the following
A. If amending name, enter the new name of the co	orporation:	
		The new
name must be distinguishable and contain the word "o	corporation" or "incorporated	l" or the abbreviation "Corp." or "Inc."
"Company" or "Co." may not be used in the name.		
B. Enter new principal office address, if applicable		
(Principal office address <u>MUST BE A STREET ADI</u>	<u>ORESS</u>)	
C. Enter new mailing address, if applicable:		
(Mailing address MAY BE A POST OFFICE BO	<u></u>	
		
D. If amending the registered agent and/or registe	rad office address in Florida	enter the name of the
new registered agent and/or the new registered		cite of the dame of the
Name of New Registered Agent:		
New Registered Office Address:	(F)	lorida street address)
New Regissered Office Mada else.		
_		Florida
	(City)	(Zip Code)
New Registered Agent's Signature, if changing Reg	istered Agent:	
I hereby accept the appointment as registered agent.	I am familiar with and accept	the obligations of the position.
	Signature of New Regist	ered 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	PT John D V Mike J SV Sally S	<u>ones</u>	
Type of Action (Check One)	<u>Title</u>	<u>Name</u>	<u>Addres</u> s
1) _X Change Add	ADM	DENNYS SEQUERA	4582 FIGH EDNO G
Remove			ORLANDO, FL 32824
2) Change Add			
Remove 3) Change Add Remove			
4) Change Add			
Remove			
5) Change Add			
Remove			
6) Change Add			
Remove			
E. If amending or additional sheet	ng additional Artets, if necessary).	ticles, enter change(s) here: (Be specific)	
·····		···	

The date of each amendment(s) adoption:date this document was signed.	, if other than the
Effective date if applicable: 10 -01-21	
Effective date if applicable: 10-01-21 (no more than 90 days after	r amendment file date)
Note: If the date inserted in this block does not meet the applicable s document's effective date on the Department of State's records.	
Adoption of Amendment(s) (CHECK ONE)	
The amendment(s) was/were adopted by the members and the newas/were sufficient for approval.	umber of votes cast for the amendment(s)

7	here are no members or members entitled to vote on the amendment(s). The amendment(s) was/were lopted by the board of directors.
	Dated 09-10-21
	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)
	ADRIAN HERNANDEZ
	(Typed or printed name of person signing)
	PRESIDENT (P)
	(Title of person signing)