N21000004212

| (Re | questor's Name) | _ |
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| (Ad | dress) | <u> </u> |
| (Ad | dress) | |
| (Cit | y/State/Zip/Phon | e #) |
| PICK-UP | MAIT | MAIL |
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| Certified Copies | _ Certificate: | s of Status |
| Special Instructions to | Filing Officer: | |
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COVER LETTER

TO: Amendment Section Division of Corporations

| ANAME OF CORPORATION: | AIGOS DEL CAI | BALLO INC | | | <u> </u> | |
|---|-------------------------------------|--|------------|--------------------|--|---|
| | 0004212 | | | | | |
| DOCUMENT NUMBER: | <u> </u> | | _ | _ | | |
| The enclosed Articles of Amendme | u and fee are sub | mitted for filing. | | | | |
| Please return all correspondence co | ncerning this matt | er to the following | <u>:</u> : | | | |
| ROBERTO GONZALEZ | | | | | | |
| | | (Name of Contac | t Person) | - | | |
| AMIGOS DEL CABALLO | | | | | | |
| | _ | (Firm/ Comp | oany) | | - | |
| 8270 WEST STATE ROAD 84 | | | | | | |
| | <u></u> | (Address | 5) | 1 | | |
| DAVIE, FL. 33324 | | | | | | |
| - | | (City/ State and 2 | Zip Code) | | | |
| ROGOMEJIOA@GMAIL.COM | | | | | | |
| E-mail a | ddress: (to be used | l for future annua | report no | tification |) | |
| For further information concerning | this matter, please | call: | | | | |
| ROBERTO GONZALEZ | | | 786 _at | | 409-9958 | |
| (Name | of Contact Person |) | | (Code) | (Daytime Telephone Number |) |
| Enclosed is a check for the following | g amount made p | ayable to the Flor | ida Depart | ment of S | State: | |
| ■ \$35 Filing Fee □\$43 Cer | 75 Filing Fee & difficate of Status | □\$43.75 Filing I Certified Copy (Additional co enclosed) | | Certifi Certifi | Filing Fee cate of Status ed Copy ional Copy is sed) | |
| <u>Mailing Address</u> Amendment Secti | | | Street An | | on | |

Division of Corporations P.O. Box 6327

Tallahassee, FL 32314

Division of Corporations The Centre of Tallahassee 2415 N. Monroe Street, Suite 810 Tallahassee, Ft. 32303

Articles of Amendment to Articles of Incorporation of

AMIGOS DEL CABALLO INC

| (Name of Corporation as currently filed with the Fl | orida Dept. of State) | |
|---|--|--|
| N21000004212 | | |
| (Document | Number of Corporation (if k | nown) |
| Pursuant to the provisions of section 617,1006, Florida amendment(s) to its Articles of Incorporation: | Statutes, this Florida Not Fo | or Profit Corporation adopts the following |
| A. If amending name, enter the new name of the co | erporation: | |
| | | The new |
| name must be distinguishable and contain the word "c "Company" or "Co." may not be used in the name | orporation" or "incorporated | I" or the abbreviation "Corp." or "Inc " |
| B. Enter new principal office address, if applicable (Principal office address MUST BE A STREET ADD | <u>:</u> DRESS) | |
| | | |
| 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 register new registered agent and/or the new registered agent. | red office address in Florida office address: | enter the name of the |
| Name of New Registered Agent: | | |
| New Registered Office Address: | | lorida sireei addressi |
| | | Florida |
| _ | (City) | , Florida (Zip Code) |
| New Registered Agent's Signature, if changing Reg I hereby accept the appointment as registered agent. | istered 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 | $\overline{\underline{\mathbf{V}}}$ $\underline{\underline{\mathbf{Mi}}}$ | n Doe ke Jones ly Smith | |
|---|---|---|---|
| Type of Action (Check One) | <u>Title</u> | <u>Name</u> | <u>Addres</u> s |
| 1) Change Add | <u>v</u> | ANDRES CALERO | Southwest Ranches, F. 33331 |
| x Remove | | <u></u> | |
| 2) Change Add | <u>S</u> | FABIO LAVERDE | 11900 SW 46TH STREET Miami, FL. 33175 |
| X Remove 3) Change X Add Remove | <u>v</u> | MARIA P. MICOLTA | Apt 1C Sunrise, FL. 33351 |
| 4) Change Add | <u>S</u> | JOSE L. HERRERA | 3247 West 100 Terrace Hialeah Gardens, FL. 33018 |
| Remove | | | |
| 5) Change Add | | | |
| Remove | | | |
| 6) Change Add | | - <u>-</u> | |
| Remove | | | |
| E. If amending or ad (attach additional s. | ding additional heets, if necessar | Articles, enter change(s) here: y). (Be specific) | |
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| | 06/11//2021 | | |
| The date of each amendment date this document was signed | s) adoption: | <u> </u> | , if other than the |
| Effective date if applicable: | 06/11/2021 | | |
| | (no more than 90 days afte | | |
| <u>Note:</u> If the date inserted in the document's effective date on the | s block does not meet the applicable s e Department of State's records. | tatutory filing requirements. | this date will not be listed as the |
| Adoption of Amendment(s) | (<u>CHECK ONE</u>) | | |
| The amendment(s) was/w was/were sufficient for ap | ere adopted by the members and the moreoval. | imber of votes cast for the a | mendment(s) |

| 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 -0671172021 Signature -0671172021 |
| (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) |
| ROBERTO GONZALEZ |
| KOBERTO GONZALEZ |
| (Typed or printed name of person signing) |
| PRESIDENT |
| (Title of person signing) |
| |
| |