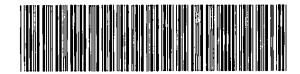
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1/13/2023

COVER LETTER

- TO: Amendment Section Division of Corporations

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NAME OF CORPORATION: Anapavo International Phinistries Inc.
DOCUMENT NUMBER: N 220000 5365
The enclosed Articles of Amendment and fee are submitted for filing.
Please return all correspondence concerning this matter to the following:
Romina Cherven (Name of Contact Person)
(Nume of Contact Fellon)
Anapavo International Himistries Inc.
(Firm/ Company)
PO Box 666-831
Pompano Beach Fl 33066. (City/ State and Zip Code)
(City/ State and Zip Code)
Missiousardinia a gmail com. E-mail address: (to be used for future annual report notification)
For further information concerning this matter, please call:
Romina Cherren at 7724759214
(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:
☐ \$35 Filing Fee ☐ \$43.75 Filing Fee & ☐ \$43.75 Filing Fee & ☐ \$52.50 Filing Fee Certificate of Status Certificate of Status (Additional copy is enclosed) Certificate of Status Certified Copy (Additional Copy is Enclosed)

Mailing Address
Amendment Section Division of Corporations P.O. Box 6327

Street Address

Amendment Section Division of Corporations The Centre of Tallahassee

Articles of Amendment to Articles of Incorporation

FILED

2023 JAN 13 PM 12: 12 Juc - SHORL mistries (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(s) to its Articles of Incorporation: A. If amending name, enter the new name of the corporation: name must 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. b. Enter new principal office address, if applicable: (Principal office address MUST BE A STREET ADDRESS) C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX) 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:

tor

Fort Lauderdale

Florida 33309

(Zip Code

New Registered Agent's Signature, if changing Registered Agent:

New Registered Office Address

I hereby accept the appointment as registered agent. I am familiar with and accept the obligations of the position

Signature of New Legistered 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 Je SY Sally S	<u>ones</u>		
Type of Action (Check One)	Title	<u>Name</u>	<u>Addres</u> s	
1) X Change Add	_D_	Deborah Todoric	2401 W cy press C- Fort Lauderdale	rce K PQ #1 33309
Remove 2) Change Add	_D_	Loredana Hurtado	10871 NW 6th ST Caral Springs FI	33071
Remove Change Add	<u>C</u>	Chris Baselice	2401 W Cypress Fort Lauderdate	_
Remove Change Add	<u>+</u>	Diana Parker	2401 W Cyprecs Fort Lauderdale	Creek P
Remove 5)ChangeAdd				
Remove 6) Change				
Add Remove				
E. <u>If amending or addir</u> (attach additional shee		icles, enter change(s) here: (Be specific)		

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*		_
The date of each amendment(s) ac date this document was signed.	leption:	, if other that
Effective date if applicable:		
meetive date in applicable.	(no more than 90 days after amendment file date)	
Note: If the date inserted in this blo document's effective date on the De	ck does not meet the applicable statutory filing requirement partment of State's records.	nts, this date will not be listed as the
Adoption of Amendment(s)	(CHECK ONE)	

Ø	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 1/13/2023				
	Signature Romina Cherven Holles				
	(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)				
	Romina Cherven				
	(Typed or printed name of person signing)				
	President				
	(Title of person signing)				