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## **COVER LETTER**

**TO:** Amendment Section Division of Corporations

• . . . . .

Tallahassee, FL 32314

NAME OF CORPORATIO	SUMEMOS POR NI DN:	CARAGUA INC			—
DOCUMENT NUMBER: _	N23000008958				
The enclosed Articles of Am.	endment and fee are subr	mitted for filing.			
Please return all corresponde	nce concerning this matte	er to the following:			
SANTIAGO ABURTO					
		(Name of Contact	Person)		
SUMEMOS POR NICARAG	GUA INC				
		(Firm/ Compa	ıny)		
4745 POSEIDON PLACE					
		(Address)			
LAKE WORT, FL 33463					<u> </u>
		(City/ State and Zi	ip Code)		~
info@nmaccountingservices	.com				
E-	-mail address: (to be used	for future annual	report notifica	tion)	
For further information conce	erning this matter, please	call:			. ~
SANTIAGO ABURTO			786 at	992-4292	
(	(Name of Contact Person)	)	(Area Cod	e) (Daytime Telepho	ne Number)
Enclosed is a check for the fo	ollowing amount made pa	yable to the Florid	la Department	of State:	
■ \$35 Filing Fee	□\$43.75 Filing Fee & Certificate of Status		Ce y is Ce (A	2.50 Filing Fee rtificate of Status rtified Copy dditional Copy is nclosed)	
Mailing A Amendmer Division of P.O. Box 6	nt Section Corporations	- - -	Street Addrest Amendment S Division of Co The Centre o	ection	

2415 N. Monroe Street, Suite 810

Tallahassee, FL 32303

## Articles of Amendment to Articles of Incorporation of

SUMEMOS POR NICARAGUA INC

(Name of Corporation as currently filed with the	Florida De	pt. of State)	
N23000008958		**	
(Docum	nent Number	of Corporation	if known)
Pursuant to the provisions of section 617.1006, Flor amendment(s) to its Articles of Incorporation:	rida Statutes.	this <i>Florida No</i>	t For Profit Corporation adopts the following
A. If amending name, enter the new name of the	e corporatio	<u>n:</u>	
N/A			The new
name must be distinguishable and contain the word "Company" or "Co." may not be used in the nume		on" or "incorpoi	ated" or the abbreviation "Corp." or "Inc."
B. Enter new principal office address, if applical	ble:	N/A	
(Principal office address MUST BE A STREET A			
	-		
	_		
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE I	<u>BOX</u> )	N/A	e.
	_		
		<u></u>	· · · · · · · · · · · · · · · · · · ·
D. If amending the registered agent and/or registered agent and/or the new registered.			ida, enter the name of the
· · · · · · · · · · · · · · · · · · ·	N/A	11 €35.	
Name of New Registered Agent:			
		······································	(Florida street address)
New Registered Office Address:			II influa so cel duaressy
	N/A		, Florida
		(City)	(Zip Code)
New Registered Agent's Signature, if changing R I hereby accept the appointment as registered agent			cept the obligations of the position.
	-		•
_	Sign	nature of New Re	gistered 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 Do           V         Mike Jo           SV         Sally Sr	ones	
Type of Action (Check One)	Title	Name	<u>Addres</u> s
1) Change Add	SEC	PILAR PENA	3900 WOODLAKE BLVD, STE 207 E, GREENACRE FL 33463
x Remove			· ``
2) Change Add	SEC	SARAHI DEL C. SPALDING	8360 OAKDALE AVE WINNETEKA, CA 91306
Remove 3 ) Remove Add Remove			
4) Change Add			
Remove			
5) Change Add			
Remove			
6) Change Add			
Remove			<u> </u>
E. If amending or adding (attach additional sheet)		cles, enter change(s) here: (Be specific)	

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	<del></del>
The date of each amendment(s) adoption: 10/31/2023 date this document was signed.	, if other than the
10/31/2023	
Effective date if applicable: (no more than 90 days after amendment file d	late)
<b>Note:</b> If the date inserted in this block does not meet the applicable statutory filing requidocument's effective date on the Department of State's records.	airements, this date will not be listed as the

(CHECK ONE)

The amendment(s) was/were adopted by the members and the number of votes cast for the amendment(s)

Adoption of Amendment(s)

was/were sufficient for approval.

Dated	10/31/2023
Dated	
Signatur	
	(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)
	SANTIAGO ABURTO
	(Typed or printed name of person signing)

(Title of person signing)