P00 0000 47334

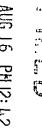
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A. Butter 8/26/21

COVER LETTER

TO: Amendment Section Division of Corporations

NAME OF CORPO	DRATION: Myrtha Pools USA	A	
DOCUMENT NUM	IBER: P00000047334		
	s of Amendment and fee are su	bmitted for filing.	
Please return all corr	espondence concerning this ma	atter to the following:	
	Alessandro Orio		
		Name of Contact Person	1
	Myrtha Pools USA		
		Firm/ Company	
	1800 2nd Street, Suite 758		
		Address	
	Sarasota, FL 34236		
		City/ State and Zip Code	e
	aorio@myrthapoolsusa.com		
	E-mail address: (to be us	sed for future annual report	notification)
For further informati	on concerning this matter, plea	se call:	
Alessandro Orio		941 at (de & Daytime Telephone Number
Name	of Contact Person	Area Co	de & Daytime Telephone Number
Enclosed is a check t	for the following amount made	payable to the Florida Depa	artment of State:
■ \$35 Filing Fee	☐\$43.75 Filing Fee & Certificate of Status	□\$43.75 Filing Fee & Certified Copy (Additional copy is enclosed)	☐\$52.50 Filing Fee Certificate of Status Certified Copy (Additional Copy is enclosed)
Mailing Address Amendment Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314		Amend Divisio The Co	Address ment Section on of Corporations entre of Tallahassee N. Monroe Street, Suite 810

Tallahassee, FL 32303

Articles of Amendment to Articles of Incorporation of



ocument Number o	y filed with the Florida Dept. of State)	GEORETAIN / OF STAT TALLAMASSEE, FL
orida Statutes, this	f Corporation (if known)	MALCAMASSEE, FL
orida Statutes, this	f Corporation (if known)	MALCAMASSEE, FL
	Florida Profit Corporation adopts the fo	ollowing amendment(s) to
e corporation:		
		The new
Inc," or "Co"A	company," or "incorporated" or the abb. A professional corporation name must	reviation "Corp.,"
	N/A	
ADUKESS)		
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)		
<u>BO.(</u>)		
		
istared office add	roce in Florida, antar the name of the	
Third Ava 23rd El	OAT	
		
	- ,	3394
	, Florida,	(Zip Code)
	TOTO	my code
	Inc, " or "Co". Abbreviation "P.A." able: ADDRESS) BOX) istered office address Third Ave, 23rd Flanderdale	N/A BOX) N/A N/A N/A N/A N/A Stered office address in Florida, enter the name of the red office address: Third Ave. 23rd Floor (Florida street address)

Check if applicable

☐ The amendment(s) is/are being filed pursuant to s. 607.0120 (11) (e), F.S.

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	<u>PT</u>	John Doe	
X Remove	<u>V</u>	Mike Jones	
X Add	<u>SV</u>	Sally Smith	
Type of Action (Check One)	<u>Title</u>	<u>Name</u>	<u>Addres</u> s
1) Change			
Add			
Remove			
2) Change			
Add			
Remove 3) Change			
Add			
Remove			
4) Change			
Add			
Remove			
5) Change			
Add			
Remove			
6) Change			
Add		<u> </u>	
Remove			

(Attach	nding or adding additional Artic additional sheets, if necessary).	(Be specific)	_	
		<u> </u>		
	<u> </u>			
				_ .
<u> </u>				
				
				
	<u></u>			· · · ·
. If an a	mendment provides for an excha sions for implementing the amen	inge, reclassification, or idment if not contained	<u>cancellation of issued</u> in the amendment itsel	<u>shares,</u> if:
(/	f not applicable, indicate N/A)			-
_			<u> </u>	
			-	
	·			
	•		•	

• •

The date of each amendment	(s) adoption:	if other than the
date this document was signed	,	
Effective date <u>if applicable</u> :	August 12th 2021	
	(no more than 90 days after amendment	file date)
	this block does not meet the applicable statutory filing red he Department of State's records.	quirements, this date will not be listed as the
Adoption of Amendment(s)	(<u>CHECK ONE</u>)	
The amendment(s) was/wer action was not required.	re adopted by the incorporators, or board of directors witho	ut shareholder action and shareholder
☐ The amendment(s) was/wer by the shareholders was/we	re adopted by the shareholders. The number of votes cast for ere sufficient for approval.	or the amendment(s)
	re approved by the shareholders through voting groups. The d for each voting group entitled to vote separately on the a	
"The number of votes	cast for the amendment(s) was/were sufficient for approva	.1
by N/A	_	."
, <u> </u>	(voting group)	
Augu: Dated Signature	st 12th 2021	
(B	y a director, president or other officer – if directors or offic lected, by an incorporator – if in the hands of a receiver, tro pointed fiduciary by that fiduciary)	
	Alessandro Orio	
	(Typed or printed name of person signing)	
	Secretary - Treasurer	
	(Title of person signing)	

. .