P00000115590

((Requestor's Name)	
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COVER LETTER

TO: Amendment Section Division of Corporations

NAME OF CORPOR	RATION: PENIEL INC.	<u></u>	
DOCUMENT NUME		····	
	of Amendment and fee are su	bmitted for filing.	
Please return all corres	pondence concerning this ma	tter to the following:	
	BARCELLONA, GABRIEL	ALEXANDRO	
		Name of Contact Persor	1
	PENIEL INC		
		Firm/ Company	
	9382 NW 101 ST		
	- -	Address	
	MEDLEY, FL 33178		
		City/ State and Zip Code	
	GABRIEL@PENIEL.COM		
	-	sed for future annual report	notification)
For further information	n concerning this matter, pleas	786	. 262–4853
· · · · · · · · · · · · · · · · · · ·	of Contact Person	at ()
	r the following amount made		,
S35 Filing Fee	☐\$43.75 Filing Fee & Certificate of Status	□\$43.75 Filing Fee & Certified Copy (Additional copy is enclosed)	S52.50 Filing Fee Certificate of Status Certified Copy (Additional Copy is enclosed)
Ame Divi P.O.	ling Address endment Section sion of Corporations Box 6327 chassee, FL 32314	Amend Divisio The Ce 2415 N	Address ment Section on of Corporations entre of Tallahassee N. Monroe Street, Suite 810 ussee, FL 32303

Articles of Amendment to Articles of Incorporation of

PENIEL INC.

(Name of Corporation as curre	ntly filed with the Florida I	Dept. of State)
P00000115590		
(Document Number	r of Corporation (if known)	
Pursuant to the provisions of section 607.1006, Florida Statutes, thits Articles of Incorporation:	is Florida Profit Corporatio	n adopts the following amendment(s)
A. If amending name, enter the new name of the corporation:		
		The new
name must be distinguishable and contain the word "corporation," "Inc.," or Co.," or the designation "Corp," "Inc," or "Co". "chartered," "professional association," or the abbreviation "P	A professional corporatio	ed" or the abbreviation "Corp.," in name must contain the word
B. Enter new principal office address, if applicable:		
(Principal office address <u>MUST BE A STREET ADDRESS</u>)		
		in.,
		
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)		
(Mailing address MAT BE A POST OFFICE BOX)		
D. If amending the registered agent and/or registered office ac	ldress in Fl <u>ori</u> da, enter the	name of the
new registered agent and/or the new registered office addre		
Name of New Registered Agent		<u></u>
(Florida	street address)	
New Registered Office Address:		, Florida
	(City)	(Zip Code)
New Registered Agent's Signature, if changing Registered Age	nt:	
I hereby accept the appointment as registered agent. I am familia	r with and accept the obligat	tions of the position.
Signature of New	Registered Agent, if changing	ng
Check if applicable		
☐ The amendment(s) is/are being filed pursuant to s. 607.0120 (1	I) (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>Y</u>	Mike Jones	
X Add	<u>SV</u>	Sally Smith	
Type of Action (Check One)	<u>Title</u>	<u>Name</u>	Address
1) Change	VP	DE OLIVEIRA, CLAUDIO	5790 NW 113 PL
Add			DORAL, FL 33178
X Remove 2) X Change	P	BARCELLONA, GABRIEL ALEXA	9382 NW 101 STREET
Add			MEDLEY, FL 33178
Remove 3) X Change	VP	BARCELLONA, VICENTE D	
Add			9382 NW 101 STREET
Remove			MEDLEY, FL 33178
4) Change			
Add			
Remove			
5) Change			
Add			
Remove			
6) Change			
Add			
Remove			

If amending or adding additional Articles, enter change(s) here: (Attach additional sheets, if necessary). (Be specific)	
ELETE: DE OLIVEIRA, CLAUDIO (VP)	
10-11-11-11-11-11-11-11-11-11-11-11-11-1	
HANGE: BARCELLONA, GABRIEL ALEXANDRO(DVP to P and TO CORRECT THE LAST NAME:BARCELLON	
HANGE: BARCELLONA, VICENTE D (DVS to VP)	
	_
	—
	—
	—
	_
	_
	—
If an amendment provides for an exchange, reclassification, or cancellation of issued shares,	
provisions for implementing the amendment if not contained in the amendment itself:	
(if not applicable, indicate N/A)	
	—
	_
	_
	_
· · · · · · · · · · · · · · · · · · ·	_

	10/19/2020	
The date of each amendment(s)	adoption:	, if other than the
date this document was signed.		
	0/19/2020	
Effective date <u>if applicable</u> :	(no more than 90 days after amendment file date)	
Note: If the date inserted in this document's effective date on the	block does not meet the applicable statutory filing requirements, this Department of State's records.	date will not be listed as the
Adoption of Amendment(s)	(<u>CHECK ONE</u>)	
■ The amendment(s) was/were a action was not required.	dopted by the incorporators, or board of directors without shareholder ac	tion and shareholder
☐ The amendment(s) was/were a by the shareholders was/were	dopted by the shareholders. The number of votes cast for the amendmer sufficient for approval.	u(s)
	pproved by the shareholders through voting groups. The following state or each voting group entitled to vote separately on the amendment(s):	ment
"The number of votes ca	st for the amendment(s) was/were sufficient for approval	
bv		
<i>by</i>	(voting group)	
10/19/20	20	
Dated		
Signature	Beenachun	
(By a	director, president or other officer - if directors or officers have not been	
	ted, by an incorporator - if in the hands of a receiver, trustee, or other co	urt
арро	inted fiduciary by that fiduciary)	
	BARCELLONA, GABRIEL ALEXANDRO	
	(Typed or printed name of person signing)	
	PRESIDENT	
	(Title of person signing)	