## P01000051356

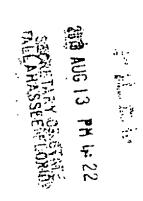
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## COVER LETTER

TO: Amendment Section Division of Corporations

Division of Corpo				
NAME OF CORPOR	RATION: NO DOUBT, INC.			NO 3 THE 22
	BER: P01000051356			
	of Amendment and fee are su			The same of the sa
	spondence concerning this ma			2
	RAFAEL A. INFANTE			%;
		Name of Contact Person		-
	NO DOUBT, INC.		_	
		Firm/ Company		•
	14645 NW 77TH AVE, SUI	ГЕ 203		
		Address		-
	MIAMI LAKES, FL 33014			
		City/ State and Zip Cod	e	-
rafael	infante2002@hotmail.com			
	<del>-</del>	sed for future annual report	notification)	
For further informatio	n concerning this matter, pleas	se call:		
RAFAEL A. INFANTE		at ( 305	469-8983	
Name of Contact Person		Area Co	de & Daytime Telephone Numbe	r
Enclosed is a check fo	r 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			Address Iment Section	
		Division of Corporations		
P.O. Box 6327		Clifton Building 2661 Executive Center Circle		
Tallahassee, FL 32314		Tallahassee, FL 32301		

## Articles of Amendment to Articles of Incorporation of

NO DOUBT, INC.

P01000051356	ntty med with the Piorida Dept. Orstate)
	of Corporation (if known)
Pursuant to the provisions of section 607,1006, Florida Statutes, th its Articles of Incorporation:	is Florida Profit Corporation adopts the following amendment(s) to
A. If amending name, enter the new name of the corporation:	
n/a	The new
name must be distinguishable and contain the word "corporat "Corp.," "Inc.," or Co.," or the designation "Corp," "Inc," or word "chartered," "professional association," or the abbreviation	tion," "company," or "incorporated" or the abbreviation "Co". A professional corporation name must contain the
B. Enter new principal office address, if applicable:	n/a
(Principal office address MUST BE A STREET ADDRESS )	n/a
	n/a
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)	n/a
	n/a 
	n/a 
D. If amending the registered agent and/or registered office ad new registered agent and/or the new registered office addre	
Name of New Registered Agent	
14645 NW 77TH AVE.	SUITE 203
(Florida)	street address)
<u>N'ew Registered Office Address</u> : MIAMI LAKES	33014 Florida
	(City) (Zip Code)
New Registered Agent's Signature, if changing Registered Age I hereby accept the appointment as registered agent. I am familia	
	Registered 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	<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	VSTD	RAMOS-INFANTE, DANIA R	14645 NW 77TH AVE, SUITE 203
Add X Remove			MIAMI LAKES, FL 33014
2) X Change	PVST	INFANTE, RAFAEL A.	14645 NW 77TH AVE, SUITE 203
Add			MIAMI LAKES, FL 33014
Remove 3 ) Change	n/a	n/a	n/a
Add			n/a
Remove			n/a 
4) Change	n/a	n/a	n/a 
Add			n/a
Remove			n/a
5) Change	n/a 	n/a 	n/a
Add			n/a
Remove			n/a
6) Change	n/a	n/a	n/a
Add			n/a
Remove			n/a

a	additional sheets, if necessary). (Be specific)
	·
_	
<u>lf an a</u>	imendment provides for an exchange, reclassification, or cancellation of issued shares,
prov	isions for implementing the amendment if not contained in the amendment itself:  if not applicable, indicate N/A)
	g nor approxime, marcine was
ļ.	

	July 12, 2019	
The date of each amendment(s) a date this document was signed.	doption:	, if other than the
July	12, 2019	
Effective date <u>if applicable</u> :	(no more than 90 days after amendment file date)	<u></u>
Note: If the date inserted in this the document's effective date on the Do	block does not meet the applicable statutory filing requirements, this corporation of State's records.	date will not be listed as the
Adoption of Amendment(s)	(CHECK ONE)	
The amendment(s) was/were add by the shareholders was/were su	opted by the shareholders. The number of votes cast for the amendment afficient for approval.	l(s)
	proved by the shareholders through voting groups. The following statem each voting group entitled to vote separately on the amendment(s):	nent
"The number of votes cast	for the amendment(s) was/were sufficient for approval	
by	(voting group)	
	(voting group)	
☐ The amendment(s) was/were add action was not required.	opted by the board of directors without shareholder action and sharehold	der
☐ The amendment(s) was/were add action was not required.	opted by the incorporators without shareholder action and shareholder	
July 15, 20	19	
DatedSignature (X)	Mille	
selecte	firedior, president or other officer—if-directors or officers have not been d, by an incorporator — if in the hands of a receiver, trustee, or other conted fiduciary by that fiduciary)	
	RAFAEL A. INFANTE	
	(Typed or printed name of person signing)	<del></del>
	PVST	
	(Title of person signing)	

as the