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COVER LETTER

TO: Amendment Section Division of Corporations

NAME OF CORPO	RATION: ROQUE ENTER	PRISE GROUP INC ,		
DOCUMENT NUMI	BER:	· · · · · · · · · · · · · · · · · · ·		
The enclosed Articles	of Amendment and fee are su	bmitted for filing.	•	
Please return all corre	spondence concerning this ma	tter to the following:		
	ADRIEL ROQUE			
		Name of Contact Person	1	
	ROQUE ENTERPRISE GROUP INC,			
	-	Firm/ Company		
	26611 OLD 41 ROAD			
	 	Address		
	BONITA SPRINGS FL 341	36		
		City/ State and Zip Code	2	
	REGIUNIVERSAL@GMAI	L.COM		
	E-mail address: (to be us	sed for future annual report	notification)	
For further informatio	n concerning this matter, pleas	se call:		
ADRIEL ROQUE		239	4048085	
Name	of Contact Person		de & Daytime Telephone Number	
Enclosed is a check fo	r the following amount made	payable to the Florida Depa	artment of State;	
S35 Filing Fee	■\$43.75 Filing Fee & Certificate of Status	S43.75 Filing Fee & Certified Copy (Additional copy is enclosed)	S52.50 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		Street Address Amendment Section Division of Corporations The Centre of Tallahassee 2415 N. Monroe Street, Suite 810		

Tallahassee, FL 32303

Articles of Amendment to Articles of Incorporation of

ROQUE ENTERPRISE GROUP, INC			
(<u>Name</u> e	of Corporation as curren	tly filed with the Florida Dept. of State)	
P03000071202			
	(Document Number	of Corporation (if known)	
Pursuant to the provisions of section 607, its Articles of Incorporation:	1006, Florida Statutes, thi	s Florida Profit Corporation adopts the follo	owing amendment(s) to
A. If amending name, enter the new n	ame of the corporation:		
			The new
	lorp," "Inc," or "Co".	"company," or "incorporated" or the abbrev A professional corporation name must co "	ciation "Corp"
B. Enter new principal office address,			
(Principal office address <u>MUST BE A S</u>	TREET ADDRESS)		. 120
			- .
C. Enter new mailing address, if appl			ær (°
(Mailing address <u>MAY BE A POST</u>	<u>OFFICE BOX</u>)		99
			
			~
 If amending the registered agent ar new registered agent and/or the new 			
-	ADRIEL ROQUE		
Name of New Registered Agent	520 SOLL ST	• •	
		treet address)	
	NAPLES	341	09
New Registered Office Address:		, Florida	Zip Code)
		(CII)	<i>τ.ιρ (λια</i> υ)
New Registered Agent's Signature, if c	hanging Registered Ago	1	
		with and accept the obligations of the positi	on.
	AQ		
	Signature of New	Registered Agent, if changing	

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)

Example:

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.

<u>X</u> Change	<u>P1</u>	John Doe	
X Remove	$\underline{\mathbf{V}}$	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) X Change	Р	ADRIEL ROQUE	520 SOLL ST
Add			NAPLES FL 34109
Remove 2) X Change	VP	FELIX ROQUE	3077 52ND STREET SW
Add	· 		NAPLES FL 34116
Remove 3) Change			
Add			
Remove			
4) Change		_	
Add			
Remove			•
5) Change			
Add			
Remove			
6) Change			
Add			
Remove			

	ng additional Articles sets, if necessary). (1	Be specific)			
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an amendment pro	ovides for an exchang	e, reclassification, o	r cancellation of is	sued shares,	
rovisions for imple	ovides for an exchangementing the amendm	<u>ient if not contained</u>	in the amendmen	t itself:	
(if not applicable	z, indicate N/A)				
		<u> </u>	· -		
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	01/01/2020	
The date of each amendment		, if other than the
date this document was signed		
TO 0 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	01/01/2020	
Effective date <u>if applicable</u> :	(no more than 90 days after amendment file date)	
	(no more than 90 days after amenament fite date)	
	this block does not meet the applicable statutory filing requirements, this dathe Department of State's records.	te will not be listed as the
Adoption of Amendment(s)	(CHECK ONE)	
The amendment(s) was/wer action was not required.	re adopted by the incorporators, or board of directors without shareholder action	on and shareholder
☐ The amendment(s) was/wer by the shareholders was/w	re adopted by the shareholders. The number of votes east for the amendment(sere sufficient for approval.	(8
	re approved by the shareholders through voting groups. The following statement of for each voting group entitled to vote separately on the amendment(s):	ent
"The number of votes	s cast for the amendment(s) was/were sufficient for approval	
bv	··	•
···	(voting group)	
	y a director, president or other officer) if directors or officers have not been	
	elected, by an incorporator – if in the hands of a receiver, trustee, or other cour oppointed fiduciary by that fiduciary)	1
	ADRIEL ROQUE	
	(Typed or printed name of person signing)	
	PRESIDENT	
	(Title of person signing)	