Pt4000094964

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A. BUTLER

MAR 2 4 2023

COVER LETTER

TO: Amendment Section Division of Corporations

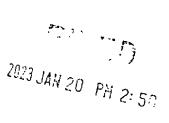
NAME OF CORPOR	ATION:INOUE INVESTM	ENTS INC.					
DOCUMENT NUME	BER: P04000094964						
	of Amendment and fee are sub	omitted for filing.					
Please return all corres	pondence concerning this mat	ter to the following:					
	GEORGE INOUE						
		Name of Contact Person					
	INOUE INVESTMENTS IN	C					
		Firm/ Company					
	1505 SW 4TH AVE						
	Address						
	BOCA RATON / FLORIDA 33432						
		City/ State and Zip Code	2				
	georgeinoue@yahoo.com						
	E-mail address: (to be us	ed for future annual report	notification)				
For further informatio	n concerning this matter, pleas	se call:					
GEORGE INOUE		at (<u>786</u>	3552960				
Name	of Contact Person	Area Code & Daytime Telephone Number					
Enclosed is a check fo	r the following amount made	payable to the Florida Depa	artment of State:				
□ \$35 Filing Fee	S43.75 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)				
Ame Div	iling Address endment Section ision of Corporations Box 6327	Street Address Amendment Section Division of Corporations The Centre of Tallahassee					

Tallahassee, FL 32314

2415 N. Monroe Street, Suite 810

Tallahassee, FL 32303

Articles of Amendment to Articles of Incorporation of



(Name of Corporation as curre	ntly filed with the Florida Dept. of State)		
04000094964	· ·		
(Document Number	r of Corporation (if known)		
ursuant to the provisions of section 607.1006, Florida Statutes, the Articles of Incorporation:	nis Florida Profit Corporation adopts the following amendment(s		
. If amending name, enter the new name of the corporation:			
	The new		
ame 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 corporation name must contain the word		
B. Enter new principal office address, if applicable:	1505 SW 4TH AVE		
Principal office address <u>MUST BE A STREET ADDRESS</u>)	BOCA RATON, FLORIDA 33432		
Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)	1505 SW 4TH AVE		
	BOCA RATON, FLORIDA 33432		
). If amending the registered agent and/or registered office as new registered agent and/or the new registered office addr			
Name of New Registered Agent			
(Florida	street address)		
New Registered Office Address:	, Florida		
	(City) (Zip Code)		
New Registered Agent's Signature, if changing Registered Age	ent <u>:</u>		
hereby accept the appointment as registered agent. I am familio	ar with and accept the obligations of the position.		
- CV	w 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.

X Change	<u> PT</u>	John Do	<u>oe</u>	
X Remove	<u>V</u>	Mike Jo	<u>nes</u>	
X Add	<u>sv</u>	Sally Sn	nith	
Type of Action (Check One)	<u>Title</u>		Name	<u>Addres</u> s
1) Change	D		CLAUDIA INOUE MICHELATO	1505 SW 4TH AVE
X Add				BOCA RATON, FLORIDA 33432
Remove				
2) Change				
Add				
Remove 3) Change		_		
Add				
Remove				
4) Change		_		
Add				
Remove				
5) Change				
Add				
Remove				
6) Change				
Add				
Remove				

E. If amending or adding additional Articles, enter change(s) here: (Attach additional sheets, if necessary). (Be specific)
ARTICLE IV
The number of shares the corporation issued is the following: 35 shares to Eleni Cintra Moraes Inoue,
35 shares to George Inoue and 30 shares to Claudia Inoue Michelato
F. 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) N/A
170

Effective date if applicable: (no more than 90 days after amendment file date) Note: If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as the document's effective date on the Department of State's records. Adoption of Amendment(s) (CHECK ONE) The amendment(s) was/were adopted by the incorporators, or board of directors without shareholder action and shareholder action was not required. The amendment(s) was/were adopted by the shareholders. The number of votes cast for the amendment(s) by the shareholders was/were sufficient for approval. The amendment(s) was/were approved by the shareholders through voting groups. The following statement must be separately provided for each voting group entitled to vote separately on the amendment(s): "The number of votes cast for the amendment(s) was/were sufficient for approval by ALL SHAREHOLDERS (voting group) 01/12/2023 Dated Signature (By a director, president or other officer – if directors or officers have not been selected, by an incorporator—if in the hands of a receiver, trustee, or other court appointed fiduciary by that fiduciary) GEORGE INOUE (Typed or printed name of person signing) VP (Title of person signing)			01/12/2023			
Effective date if applicable: (no more than 90 days after amendment file date)		adoption: _				, if other than the
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(Typed or printed name of person signing) VP (Title of person signing) State of Florida	selec	ted, by an inc	corporator if in the	e hands of a receiver	officers have not been r, trustee, or other cour	τ
(Title of person signing) State of Florida		GEORGE	INOUE			
(Title of person signing) State of Florida		 -	(Typed or printed	name of person sign	ing)	
State of Florida		VP				
			(Title of person sig	gning)		
	State of Florida County of Palm Beach					

Sworn (or affirmed) and subscribed before me this 12th day of 1000 , year 2023 by 6000 Trace, who is personally known to me or has produced 60 \$10 \$500-300-52-160 as identification.

JOHN LAWRENCE
MY COMMISSION # GG340165
EXPIRES August (12, 2023