P050000 12170

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COVER LETTER

Division of Corporations NAME OF CORPORATION: Precetti Inc DOCUMENT NUMBER: P05000012170 The enclosed Articles of Amendment and fee are submitted for filing. Please return all correspondence concerning this matter to the following: Sara Grassi Name of Contact Person Precetti Inc Firm/ Company 3401 N. Miami Avenue, suite 229 Address Miami FL 33127 City/ State and Zip Code sara.grassi@dewavegroup.com E-mail address: (to be used for future annual report notification) For further information concerning this matter, please call: Sara Grassi Name of Contact Person Enclosed is a check for the following amount made payable to the Florida Department of State: S35 Filing Fee **□\$43.75** Filing Fee & ☐\$43.75 Filing Fee & □\$52.50 Filing Fee Certificate of Status Certified Copy Certificate of Status (Additional copy is Certified Copy enclosed) (Additional Copy is enclosed) **Mailing Address** Street Address

Amendment Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314

TO: Amendment Section

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

Precetti Inc				
(Name of Corporatio	n as currently	filed with the Florida	Dept. of State)	
P05000012170				
(Docume	ent Number of (Corporation (if known)		
Pursuant to the provisions of section 607.1006, Florida its Articles of Incorporation:	Statutes, this Fa	lorida Profit Corporat	ion adopts the follo	wing amendment(s) to
A. If amending name, enter the new name of the cor	rporation:			
	·			The new
name must be distinguishable and contain the word "cor "Inc.," or Co.," or the designation "Corp," "Inc," "chartered," "professional association," or the abbrev	or "Co". A	mpany," or "incorpora professional corporat	ated" or the abbrevi ion name must coi	iation "Corp.,"
B. Enter new principal office address, if applicable: (Principal office address MUST BE A STREET ADD)				
C. Enter new mailing address, if applicable:				
(Mailing address MAY BE A POST OFFICE BOX	<u>((</u>)			•
 If amending the registered agent and/or registered new registered agent and/or the new registered o 		ss in Florida, enter th	e name of the	
new registered agent and/or the new registered o	ince audress.			
Name of New Registered Agent				_ _
	(Florida stree	et address)		
New Registered Office Address:			, Florida	
	10	Tity)		Lip Code)
New Registered Office Autaess.	((Tity)		Zip Code)
New Registered Agent's Signature, if changing Registreby accept the appointment as registered agent. I		th and accent the oblig	ations of the positie	221
i never, accept the appointment as registered agent.	um jummur mi	in and accept the only	unons of the position	<i>yn</i> .
Signal	ture of New Rey	gistered Agent, if chang	ging	 -

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; \ V = Vice \$

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.

\underline{X} Change	<u>PT</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) Change	AS	Justin Maroldi	360 N. Crescent Drive
X Add		_	South Building
Remove			Beverly Hills CA 90210
2) Change	AT	Dawn Walloch	360 N. Crescent Drive
X Add			South Building
Remove 3) Change		_	Beverly Hills CA 90210
Add			
Remove			
4) Change			
Add			
Remove			
51 Change			
Add			
Remove			
6) Change			
Add			
Remove			

Attach additional sheets, if necessary,	rticles, enter change). (Be specific)	, .		
		<u> </u>		
				
				
			<u> </u>	
f an amendment provides for an ex	change, reclassificat	tion, or cancellatio	n of issued shares,	
provisions for implementing the an (if not applicable, indicate N/A)	nendment if not con	tained in the amen	dment itself:	
(y not applicable, marcale way				
	·			
			-	

	September 2nd 2020	
The date of each amendment(s) adoption	n:	, if other than the
date this document was signed.		
Effective date <u>if applicable</u> :		
	(no more than 90 days after amendment f	île date)
Note: If the date inserted in this block of document's effective date on the Departm	does not meet the applicable statutory filing requent of State's records.	uirements, this date will not be listed as the
Adoption of Amendment(s)	(CHECK ONE)	
■ The amendment(s) was/were adopted by action was not required.	by the incorporators, or board of directors withou	t shareholder action and shareholder
☐ The amendment(s) was/were adopted by the shareholders was/were sufficient	by the shareholders. The number of votes cast for approval.	r the amendment(s)
	by the shareholders through voting groups. The voting group entitled to vote separately on the an	
"The number of votes cast for the	e amendment(s) was/were sufficient for approval	
by	:	••
·	(voting group)	
selected, by a appointed fid	president frother officer in directors or office in incorporator – if in the hands of a receiver, trus uciary by that fiduciary) Passalacqua (Typed or printed name of person signing)	
D AMO		
DPTS	i	

(Title of person signing)