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COR AMND/RESTATE/CORRECT OR O/D RESIGN CARIDAD DEL COBRE-REYES CORP

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Articles of Amendment to Articles of Dicorporation of

CARIDAD DEL COBRE-REYES CORP

| (Name of Corporation in currently filed with the Florida Dept. of State) P05000135632 (Document Number of Corporation (if known) Pursuant to the provisions of section 607.1006, Plorida Statutes, this Florida Frofit Corporation adopts the following amous Articles of Incorporation: A. If amending name, enter the naw name of the corporation: The same must be distinguishable and contain the word "corporation," "company," or "incorporated" or the abbrevent "Corp.," "the.," or "Co.," or the designation "Corp.," "lac," or "Co". A professional corporation name must continue word "chartered," "professional association," or the abbreviation "P.A." B. Enter new principal office address if applicable: (Malling address MAY BE A POST OFFICE BOX) D. If amending the registered agent and/or resistered office address in Florida, enter the name of the new registered agent and/or registered affice address. Name of New Registered Agent | |
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| (Document Number of Corporation (if known) ursuant to the provisions of section 607.1006, Piorida Statutes, this Florida Profit Corporation adopts the following am a Articles of Incorporation: If amending name, enter the new name of the corporation: The one must be distinguishable and contain the word "corporation," "company," or "incorporated" or the abbrevious of "corp.," "Inc.," or "Co.," or the designation "Corp.," "Inc.," or "Co., A professional corporation name must contain "chartered," "professional association," or the abbreviation "P.A." Enter new principal office address. If applicable: Principal office address MUST BE A STREET ADDRESS.) Enter new mailing address If applicable: (Mailing address MAY BE A POST OFFICE BOX) | |
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| (Florida siree) address) | |
| New Repistered Office Address: | |
| | r |
| ew Registered Azent's Signature, if changing Registered Agent: hereby accept the appointment as registered agent. I am familiar with and accept the obligations of the position, | |
| Signature of New Registered Agent, if changing | |

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(Attach additional sheets, if necessary) Flease note the officer/director title by the first latter 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 hald. President, Treasurer, Director would be PTD. Changes should be noted in the failuwing manner. Currently John Doe is listed as the PST and Mike Jones is listed as the Y. There is a change. Mike Jones leaves the corporation, Sally Smith is named the V and S. These should be noted as John Doc, PT as a Change, Mike Jones, Y as Remove, and Sally Smith, SV as an Add. Example: X Change John Doc PT X Romave ¥ Mike Jones X Add SV Saily Smith Type of Action Title Address Name (Check One) REYES, ROBERTO JR 2023 HOLLYWOOD BLVD 1) ____ Change HOLLYWOOD FL 33020 _ Add X Ramove 2) ____ Change __ Add Remove 3) _____,Change ___ Add _Remove 4) ____Change Add Remove 5) ____ Change __ Add _Remove 6) ____ Change ___ Add

If amending the Officers and/or Directors, enter the title and mans of each officer/director being removed and title, name, and

address of each Officer and/or Director being added:

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__ Remove

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| The date of each amendment(s) adop | rtion! | , if other than the |
| date this document was signed. | ' | |
| 09/09/ | | |
| CHECKET CHIEF TO THE PARTY OF T | (no more than 90 days after amendment file date) | *************************************** |
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| | ved by the shareholders through voting groups. The following statement och voting group entitled to vote separately on the amendment(s): | |
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| _ | (Typed or printed name of person signing) | |
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