P07 000055258

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COVER LETTER

TO: Amendment Section Division of Corporations

NAME OF CORPOR	ATION: PONY EX-COME	R CORPORATION			
DOCUMENT NUMB	ER: P07000055258				
The enclosed Articles of	of Amendment and fee are sub	omitted for filing.			
Please return all corres	pondence concerning this mat	ter to the following:			
	EDGAR NIVIA				
-	Name of Contact Person				
	Firm/ Company				
	3100 NW 72ND AVE SUITE 105				
•		Address			
	MIAMI, FL 33122		. <u>. </u>		
		City/ State and Zip Code			
	EDGN18@HOTMAIL.COM				
•	E-mail address: (to be us	ed for future annual report	notification)		
For further information	concerning this matter, pleas	se call:			
EDGAR NIVIA		at (305	297-7146		
Name of Contact Person		Area Co	de & Daytime Telephone Number		
Enclosed is a check for	the following amount made	payable to the Florida Depa	artment of State:		
■ \$35 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		Amend Divisio The C	Address Iment Section on of Corporations entre of Tallahassee N. Monroe Street, Suite 810		

Tallahassee, FL 32303

Articles of Amendment to Articles of Incorporation of

PONY EX-COMER CORPORATION

(Name o	of Corporation as curre	ntly filed with the Florida Dep	ot. of State)	
P07000055258				
	(Document Numbe	r of Corporation (if known)		
Pursuant to the provisions of section 607, its Articles of Incorporation:	1006, Florida Statutes, th	ás Florida Profit Corporation a	dopts the following amend	ment(s)
A. If amending name, enter the new na	ame of the corporation:			
N/A			<i>The n</i>	<i>14</i> 741'
name must be distinguishable and contain "Inc.," or Co.," or the designation "C "chartered," "professional association,"	`orp " "Inc." or "Co".	A professional corporation i	or the abbreviation "Corp	D.,
B. Enter new principal office address, (Principal office address MUST BE A S		N/A		_
(Frincipal office dances sacrets	, , , , , , , , , , , , , , , , , , ,			_
			2020 SE	
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)		N/A	FEB 2	
				ΓΠ
			2. 2. 2.	_
D. If amending the registered agent ar new registered agent and/or the new			ame of the	
Name of New Registered Agent	N/A			
	(Florida	street address)	1	
New Registered Office Address:	N/A		, Florida	
		(Cuy)	(Zip Code)	_
New Registered Agent's Signature, if c I hereby accept the appointment as regis.			ns of the position.	
	Signature of Nev	v Registered Agent, if changing		
	,, ,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	, , , , , , , , , , , , , , , , , , ,		

Check if applicable

 $[\]square$ The amendment(s) is/are being tiled 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)

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	V	Mike Jones	
<u>X</u> Add	<u>sv</u>	Sally Smith	
Type of Action (Check One)	<u>Title</u>	<u>Name</u>	<u>Addres</u> s
1) Change	AM	JOSE FERNANDO NIVIA	3100 NW 72ND AVE, SUITE 105
Add			MIAMI, F1, 33122
X Remove			
2) Change		_	
Add			
Remove 3) Change		<u> </u>	
Add			
Remove			
4) Change			
Add			
Remove			
5) Change			
Add			
Remove			· <u></u>
6) Change			
Add			
Remove			

E. If amending or adding additional Arti (Attach additional sheets, if necessary).	cles, enter change(s) here:
N/A	(ne specific)
IN/A	
F. If an amendment provides for an exclusive for implementing the amendment	nange, reclassification, or cancellation of issued shares, andment if not contained in the amendment itself:
(if not applicable, indicate N/A)	ndment it not contained in the amendment user.
N/A	
<u>k</u>	

The date of each amendment(s) adopt	N/A	, if other than the
date this document was signed.	ioir	, it oner man the
N/A		
Effective date <u>if applicable</u> :	the more than 90.	lays after amendment file date)
2,	tho more than 90 c	uivs after amenamem fue dates
Note: If the date inserted in this block document's effective date on the Depart	does not meet the applicatment of State's records.	ole statutory filing requirements, this date will not be listed as the
Adoption of Amendment(s)	(<u>CHECK ONE</u>)	
The amendment(s) was/were adopted action was not required.	by the incorporators, or bo	ard of directors without shareholder action and shareholder
☐ The amendment(s) was/were adopted by the shareholders was/were suffici		number of votes cast for the amendment(s)
☐ The amendment(s) was/were approve must be separately provided for each		gh voting groups. The following statement te separately on the amendment(s):
"The number of votes cast for t	he amendment(s) was/were	sufficient for approval
bv		.,
···	(voting group)	
FEBRUARY 17 Dated	7, 2020	
Signature	90	_
(By a directon selected, by		- if directors or officers have not been nands of a receiver, trustee, or other court
EDO	JAR NIVIA	
	(Typed or printed na	me of person signing)
PRE	ESIDENT	
_	(Title of person sign	ing)