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SECRETARY OF STATE
SIVISION OF CORFORATIONS



COVER LETTER

Division of Corporations AVENTURA UNIVERSAL ENTERPRISES, INC The enclosed Articles of Amendment and fee are submitted for filing. Please return all correspondence concerning this matter to the following: Hracelis Ventura AVENTURA UNIVERSAL ENTERPRISES, INC Firm/ Company Orange City FL. 32763
City/ State and Zip Code Aventura 71 @ carthlink.net
E-mail address: (to be used for future annual report notification) For further information concerning this matter, please call: Enclosed is a check for the following amount made payable to the Florida Department of State: □\$52.50 Filing Fee □\$43.75 Filing Fee & □\$43.75 Filing Fee & Certificate of Status Certified Copy Certificate of Status (Additional copy is Certified Copy (Additional Copy enclosed) is enclosed)

Mailing Address

TO: Amendment Section

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

Street Address

Amendment Section
Division of Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, FL 32301

Articles of Amendment to Articles of Incorporation of

FILED SECRETARY OF STATE DIVISION OF CORPORATIONS

AVENTURA UNIVERSAL ENTERPR	ISES, INC	14 JUN 23	PH 1: 34
(Name of Corporation as currently filed with the Flo			
P07000083271			
(Document Number of Corporation (if k	(nown)		
Pursuant to the provisions of section 607.1006, Florida Statutes, this Flits Articles of Incorporation:	lorida Profit Corporation a	dopts the following	amendment(s) to
A. If amending name, enter the new name of the corporation:			
			The new
name must be distinguishable and contain the word "corporation, "Corp.," "Inc.," or Co.," or the designation "Corp," "Inc," or "Coword "chartered," "professional association," or the abbreviation "P.	o". A professional corpor	orated" or the ab ation name must c	breviation ontain the
B. Enter new principal office address, if applicable: (Principal office address <u>MUST BE A STREET ADDRESS</u>)			
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)	1145 Oak la	nding Driv	e
	Orange City	12.3276	3
D. If amending the registered agent and/or registered office addressinew registered agent and/or the new registered office address:	ss in Florida, enter the na	me of the	
Name of New Registered Agent Aracelis Ve	ntura	_	
1145 Oak Lan	ding Drue	_	
New Registered Office Address: Orange City (Olsy)	er adare ss) , Florida	32763 (Zip Code)	
New Registered Agent's Signature, if changing Registered Agent: I hereby accept the appointment as registered agent. Fum familiar wi Signature of New Registered Agent	ith and accept the obligatio	ns of the position. –	

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.

X Change	PT John I	<u>Ooe</u>	
X Remove	<u>V</u> <u>Mike</u> J	lones	
X Add	SV Sally S	<u>Smith</u>	
Type of Action (Check One)	Title	Name	<u>Addres</u> s
1) Change	PT	Albert Ventura	1145 Oak Landing Dr. Drange City, FL 32763
Remove 2) Change	PTS	<u>Aracelis Ventura</u>	1145 Oak landing Dr.
Add Remove 3) Change			Orange City, FL 35763
Remove 4) Change Add Remove		<u> </u>	
5) Change Add Remove			
6) Change Add Remove			

amending or adding additional Arti attach additional sheets, if necessary).	(Be specific)					
						
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an amendment provides for an exch	ange, reclassific	ention, or ca	ncellation	of issued s	<u>hares.</u>	
orovisions for implementing the amer (if not applicable, indicate N/A)	iument ii not co	miainea i <u>ir i</u>	ine amenui	nent itseir:	•	
	 					
		-				

The date of each amendment(s) adoption:	DIVISION OF CORPORATIONS	, if other than the
date this document was signed.	14 JUN 23 PM 1: 34	
Effective date <u>if applicable</u> : (no n	nore than 90 days after amendment file date)	
Adoption of Amendment(s) (CHECK C	<u>one</u>)	
The amendment(s) was/were adopted by the shareholders was/were sufficient for approva	olders. The number of votes cast for the amendment(s) al.	
The amendment(s) was/were approved by the share must be separately provided for each voting group	holders through voting groups. The following statement entitled to vote separately on the amendment(s):	
"The number of votes cast for the amendment		
by(voting gro	oun) ,"	
	of directors without shareholder action and shareholder	
Dated		
	r other officer – if directors or officers have not been or – if in the hands of a receiver, trustee, or other court at fiduciary)	
	lis Ventura (Typed or printed name of person signing)	
P75	(Title of person signing)	