## P09000053083

	(Requestor's Name)
	(10400000000000000000000000000000000000
	(Address)
	(Address)
	(City/State/Zip/Phone #)
PICK-UF	P
	(Business Entity Name)
	(Dusiness Linky Name)
	(Document Number)
Certified Copies	Certificates of Status
0-21/2 2 2	
Special Instructions	s to Filing Officer:

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amend

11/02/21--01003--002 \*\*35.00

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A. RAMSEY NOV 1 5 2021

## **COVER LETTER**

TO: Amendment Section
Division of Corporations

NAME OF CORP	ORATION: ARIADNA & AN	ETTE CORPORATION	
DOCUMENT NUI	MBER: P08000053083		
The enclosed Article	es of Amendment and fee are su	ibmitted for filing.	
Please return all cor	respondence concerning this ma	atter to the following:	
	ANETTE DOPICO		
		Name of Contact Person	n
	ARIADNA & ANETTE CO	RPORATION	
		Firm/ Company	<del></del>
	8615 BISCAYNE BLVD		
		Address	
	MIAMI, FLORIDA 33138		
		City/ State and Zip Cod	e
	ARIADNA.CAO@ESTREL	LAINSURANCE.COM	
	E-mail address: (to be u	sed for future annual report	notification)
For further informat	ion concerning this matter, plea	se call:	757-5900
Nam	e of Contact Person		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)	☐ \$52.50 Filing Fee Certificate of Status Certified Copy (Additional Copy is enclosed)
Ar Di P.	ailing Address mendment Section vision of Corporations O. Box 6327 dlahassee, FL 32314	Amend Divisio The Co 2415 N	Address Iment Section on of Corporations entre of Tallahassee N. Monroe Street, Suite 810 ussee, FL 32303

## Articles of Amendment to Articles of Incorporation of

FILED
2021 NOV - 1 AM 11:00

to

ARIADNA & ANETTE CORPORATION

(Name of Co	rporation as currently	y filed with the Florida	Dept. of State)
P08000053083		*.	MCSEET ATTE
	(Document Number of	Corporation (if known)	
Pursuant to the provisions of section 607.1006 ts Articles of Incorporation:	, Florida Statutes, this I	Florida Profit Corporati	on adopts the following amendment
A. If amending name, enter the new name	of the corporation:		
v/A			The new
name must be distinguishable and contain the "Inc.," or Co.," or the designation "Corp, "chartered," "professional association," or t	" "Inc," or "Co". A		
3. Enter new principal office address, if ap	nlicable	N/A	
Principal office address MUST BE A STRE			
C. Enter new mailing address, if applicable (Mailing address MAY BE A POST OFF		N/A	
		<del></del>	-
<ol> <li>If amending the registered agent and/or new registered agent and/or the new reg</li> </ol>			e name of the
N/A		_	
Name of New Registered Agent			
	(Florida stre	eet address)	
New Registered Office Address:			, Florida
	(	(City)	(Zip Code)
'au Danistanad taant's Cimpture if share	ina Danistana di Ananta		
New Registered Agent's Signature, if chang hereby accept the appointment as registered			ations of the position.
			·
			<del></del>
	Signature of New Re	egistered Agent, if chang	ing
Check if applicable			

 $\Box$  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)

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	PT	John Doe	
X Remove	$\underline{v}$	Mike Jones	
X Add	<u>sv</u>	Sally Smith	
Type of Action (Check One)	<u>Title</u>	Name	<u>Addres</u> s
1) Change	<u>P</u>	ARIADNA CAO	1001 NW 7 ST APT 811
Add			MIAMI, FL 33136
X Remove			·
2) Change	P	ANETTE DOPICO	8615 BISCAYNE BLVD
X Add			MIAMI, FL 33138
Remove 3) Change			
Add			
Remove			
4) Change			
Add			
Remove			
5) Change			<del></del>
Add			
Remove			
6) Change			
Add			
Remove			

(Attach additional sheets, if necessary)	articles, enter change(s) here:  (b) (Re specific)	
	j. (Be specific)	
A		
<del></del> -		
	<del></del>	
		-
· · · · · · · · · · · · · · · · · · ·		
If an amendment provides for an ex	schange, reclassification, or cancellation of issued shares,	
(if not applicable, indicate N/A)	mendment if not contained in the amendment itself:	
A		
n 		

	s) adoption:	, if other than the
	11/01/2021	
Effective date <u>if applicable</u> :	(no more than 90 days after amendment file a	late)
	is block does not meet the applicable statutory filing requirer e Department of State's records.	nents, this date will not be listed as the
Adoption of Amendment(s)	(CHECK ONE)	
☐ The amendment(s) was/were action was not required.	adopted by the incorporators, or board of directors without sha	areholder action and shareholder
■ The amendment(s) was/were by the shareholders was/wes	adopted by the shareholders. The number of votes cast for the sufficient for approval.	e amendment(s)
· · ·	approved by the shareholders through voting groups. The following for each voting group entitled to vote separately on the amena	_
"The number of votes	east for the amendment(s) was/were sufficient for approval	
by	(voting group)	
	(voting group)	
	director, president or other officer – if directors or officers ha	
	cted) by an incorporator – if in the hands of a receiver, trustee, ointed fiduciary by that fiduciary)	or other court
	ARIADNA CAO	
	(Typed or printed name of person signing)	
	PRESIDENT	
	(Title of person signing)	