## P08000077190

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## **COVER LETTER**

**TO**: Amendment Section Division of Corporations

NAME OF CORPO	RATION: CYBR CAFFE SO	BE. CORP				
DOCUMENT NUM	BER: P08000077190					
	of Amendment and fee are su	bmitted for filing.				
Please return all corre	spondence concerning this ma	tter to the following:				
	JOSE LUIS CESPEDES MA	RTINEZ				
	Name of Contact Person					
	CONFIDENT TAX LLC					
	Firm/ Company					
	420 SW 7th St Ste 1019					
	Address					
	Miami, FL 33130					
	City/ State and Zip Code					
	info@confidenttax.com					
	E-mail address: (to be us	sed for future annual report	notification)			
For further information	n concerning this matter, pleas	se call:				
JOSE LUIS CESPEDES MARTINEZ		at ( 321	805-9551 de & Daytime Telephone Number			
Name of Contact Person		Area Co	de & Daytime Telephone Number			
Enclosed is a check for	or the following amount made	payable to the Florida Depa	irtment of State:			
☐ \$35 Filing Fee	☐S43.75 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  Tullahasson Fl. 32314		Amend Divisio The Co	Address Iment Section on of Corporations entre of Tallahassee V. Monroe Street, Suite 810			

Tallahassee, FL 32303

SECRETAIN OF STAT

## Articles of Amendment to Articles of Incorporation of

CYBR CAFFE SOBE, CORP (Name of Corporation as currently filed with the Florida Dept. of State) P08000077190 (Document Number of Corporation (if known) Pursuant to the provisions of section 607,1006, Florida Statutes, this Florida Profit Corporation adopts the following amendment(s) to its Articles of Incorporation: A. If amending name, enter the new name of the corporation: name must be distinguishable and contain the word "corporation," "company," or "incorporated" or the abbreviation "Corp.," "Inc.," or Co.," or the designation "Corp," "Inc.," or "Co". A professional corporation name must contain the word "chartered," "professional association," or the abbreviation "P.A." B. Enter new principal office address, if applicable: (Principal office address MUST BE A STREET ADDRESS ) C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX) D. If amending the registered agent and/or registered office address in Florida, enter the name of the new registered agent and/or the new registered office address: CONFIDENT TAX LLC Name of New Registered Agent 420 SW 7th St Ste 1019 (Florida street address) , Florida\_\_ Miami New Registered Office Address: (City) New Registered Agent's Signature, if changing Registered Agent: I hereby accept the appointment as registered agent. I am familiar with and accept the obligations of the position. New Registered Agent, if changing

Check if applicable

 $\square$  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.

X Change	<u>PT</u> <u>Joh</u>	un Doc	
X Remove	<u>V</u> <u>Mil</u>	ke Jones	
<u>X</u> Add	<u>SV</u> <u>Sal</u>	ly Smith	
Type of Action (Check One)	<u>Title</u>	<u>Name</u>	<u>Addres</u> s
1) Change	PT.	MARCELA CRUZ	1574 WASHINGTON AVE
Add			MIAMI BEACH, FL 33139
X Remove 2) Change	рТ	MARCELINO CUENCA	1574 WASHINGTON AVE
X Add	<del></del>		MIAMI BEACH, FL 33139
Remove Change			CEETAN TALLAH
Add			2 PR
Remove 4) Change			SECRETALLY OF STATE
Add			
Remove 5) Change			
Add			
Remove 6) Change			
Add			
Remove			

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The date of each amendment(s) ad date this document was signed.	option;	, if other than the
_	0/2024	
Effective date if applicable:		
	(no more than 90 days after amendment file date)	
Note: If the date inserted in this bl document's effective date on the De	ock does not meet the applicable statutory filing requirements, this date we partment of State's records.	ill not be listed as the
Adoption of Amendment(s)	( <u>CHECK ONE</u> )	
The amendment(s) was/were ado action was not required.	pted by the incorporators, or board of directors without shareholder action ar	nd shareholder
☐ The amendment(s) was/were ado by the shareholders was/were su	pted by the shareholders. The number of votes east for the amendment(s) flicient for approval.	
	roved by the shareholders through voting groups. The following statement each voting group entitled to vote separately on the amendment(s):	
"The number of votes cast	for the amendment(s) was/were sufficient for approval	
by	(voting group)	
•	(voting group)	S
		40 20
08/30/2024		
DatedSignature	Marcelino Quenca	MA SEP 12 PH 4: 19 SECRETARY OF STATE SECRETARY OF STATE
(By a di	rector, president or other officer - if directors or officers have not been	
	l. by an incorporator – if in the hands of a receiver, trustee, or other court	mos +
appoint	ed fiduciary by that fiduciary)	EE 9
	MARCELINO CUENCA	, 44
	(Typed or printed name of person signing)	
	PRESIDENT	
	(Title of person signing)	<del>.</del>

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