

POS 000087092

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐

PICK-UP

☐

WAIT

☐

MAIL

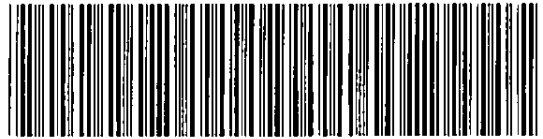
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

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11/21/24--01013--006 **43.75

CLERK OF STATE
TALLAHASSEE, FL

2024 NOV 21 AM 8:34

FILED

AP

EDUARDO ANTON
Attorney at Law
7400 S.W. 50th Terrace, Suite 304
Miami, Florida 33155
Telephone: 305-297-7752
E-mail: Eduardo@Eantonlaw.com

November 20, 2024

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

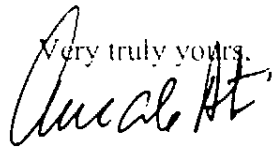
Re: Amendment to QUALITY ESPRESSO USA INC.

Dear Sir or Madam:

Enclosed herewith please find the Articles of Amendment for the above-captioned company, together with my check in the amount of \$43.75 to cover your fees.

Please file.

Thanking you for your attention to this request, I remain,

Very truly yours,

EDUARDO ANTON

EA/la

COVER LETTER

TO: Amendment Section
Division of Corporations

NAME OF CORPORATION: QUALITY ESPRESSO USA INC

DOCUMENT NUMBER: POS000087092

The enclosed *Articles of Amendment* and fee are submitted for filing.

Please return all correspondence concerning this matter to the following:

EDUARDO ANTON

Name of Contact Person

EDUARDO ANON, ATTORNEY AT LAW

Firm/ Company

7400 S.W. 50th Terrace, Suite 304

Address

Miami, FL 33155

City/ State and Zip Code

Eduardo@Eantonlaw.com

E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

EDUARDO ANTON at (305-297-7757)
Name of Contact Person Area Code & Daytime Telephone Number

Enclosed is a check for the following amount made payable to the Florida Department of State:

- | | | | |
|--|---|---|--|
| <input type="checkbox"/> \$35 Filing Fee | <input checked="" type="checkbox"/> \$43.75 Filing Fee &
Certificate of Status | <input type="checkbox"/> \$43.75 Filing Fee &
Certified Copy
(Additional copy is
enclosed) | <input type="checkbox"/> \$52.50 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

Street Address

Amendment Section
Division of Corporations
The Centre of Tallahassee
2415 N. Monroe Street, Suite 810
Tallahassee, FL 32303

Articles of Amendment
to
Articles of Incorporation
of

FILED

2024 NOV 21 AM 8:34

SECRETARY OF STATE
TALLAHASSEE, FL

QUALITY ESPRESSO USA INC

(Name of Corporation as currently filed with the Florida Dept. of State)

(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:

The new 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:

Name of New Registered Agent

(Florida street address)

New Registered Office Address:

(City)

, Florida

(Zip Code)

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.

Signature of New Registered Agent, if changing

Check if applicable

☒ The amendment(s) is/are being filed pursuant to s. 607.0120 (11) (c), 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:

☒ Change PT John Doe

☐ Remove V Mike Jones

☐ Add SV Sally Smith

Type of Action (Check One)	Title	Name	Address
1) <input type="checkbox"/> Change	<u>P</u>	<u>JUAN JOSE MACH LOPEZ</u>	<u>QUALITY ESPRESSO S.A.</u>
<input type="checkbox"/> Add			<u>MOTORES 1-9</u>
<input checked="" type="checkbox"/> Remove			<u>BARCELONA 08040 ES</u>
2) <input type="checkbox"/> Change	<u>P</u>	<u>STEFANO CRIMMI</u>	<u>QUALITY ESPRESSO S.A.</u>
<input checked="" type="checkbox"/> Add			<u>MOTORES 1-9</u>
<input type="checkbox"/> Remove			<u>BARCELONA 08040 ES</u>
3) <input type="checkbox"/> Change			
<input type="checkbox"/> Add			
<input type="checkbox"/> Remove			
4) <input type="checkbox"/> Change			
<input type="checkbox"/> Add			
<input type="checkbox"/> Remove			
5) <input type="checkbox"/> Change			
<input type="checkbox"/> Add			
<input type="checkbox"/> Remove			
6) <input type="checkbox"/> Change			
<input type="checkbox"/> Add			
<input type="checkbox"/> Remove			

E. If amending or adding additional Articles, enter change(s) here:

(Attach additional sheets, if necessary). (Be specific)

This image shows a single sheet of white paper with horizontal ruling lines. The lines are evenly spaced and run across the width of the page. There are no margins, text, or other markings on the paper.

F. If an amendment provides for an exchange, reclassification, or cancellation of issued shares, provisions for implementing the amendment if not contained in the amendment itself:

(if not applicable, indicate N/A)

NOVEMBER 1, 2024

The date of each amendment(s) adoption: _____, if other than the date this document was signed.

Effective date if applicable: DATE OF FILING
(no more than 90 days after amendment file date)

Note: If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as the document's effective date on the Department of State's records.

Adoption of Amendment(s) (CHECK ONE)

- ☒ The amendment(s) was/were adopted by the incorporators, or board of directors without shareholder action and shareholder action was not required.
- ☐ The amendment(s) was/were adopted by the shareholders. The number of votes cast for the amendment(s) by the shareholders was/were sufficient for approval.
- ☐ The amendment(s) was/were approved by the shareholders through voting groups. The following statement must be separately provided for 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)"

Dated

11-1-24

Signature

(By a director, president or other officer - if directors or officers have not been selected, by an incorporator - if in the hands of a receiver, trustee, or other court appointed fiduciary by that fiduciary)

JOSEP CASASAYAS PUIG

(Typed or printed name of person signing)

SECRETARY/DIRECTOR

(Title of person signing)