# PORCULTIE

(Requestor's Name)
(Address)
(Address)
(City/State/Zip/Phone #)
PICK-UP WAIT MAIL
(Business Entity Name)
(Document Number)
Certified Copies Certificates of Status
Special Instructions to Filing Officer

Office Use Only



900435260879

05/20/24--01625--057 \*\*46.75

4AUG 23 PH 1:0

### **COVER LETTER**

\* TO: Amendment Section Division of Corporations

Tallahassee, FL 32314

NAME OF CORPORA	ATION:	SEFENI GROUP INC.					
DOCUMENT NUMBE	ER:	P09000029212					
The enclosed Articles of	f Amendment and fee are su	bmitted for filing.					
Please return all corresp	ondence concerning this ma	tter to the following:					
		JAVIER M. SANCHEZ	7.				
_	•	Name of Contact Person	1				
		SEFENI GROUP INC.					
_		Firm/ Company	<del></del> -				
		13605 SW 149 AVENU	Е				
	<del></del>	Address					
	MIAMI, FLORIDA 33186						
	<u>.</u>	City/ State and Zip Code	e				
		SEFENI3@GMAIL.COM	1				
_	E-mail address: (to be us	ed for future annual report	notification)				
For further information	concerning this matter, pleas	se call:					
JAVIER M. SANCHEZ	<u>.</u>	at (	281-5254				
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	■\$43.75 Filing Fee & Certified Copy (Additional copy is enclosed)	☐\$52,50 Filing Fee Certificate of Status Certified Copy (Additional Copy is enclosed)				
Mailing Address Amendment Section Division of Corporations P.O. Box 6327		Amend Divisio	Address Iment Section on of Corporations entre of Tallahassee				

2415 N. Monroe Street, Suite 810

Tallahassee, FL 32303

#### **Articles of Amendment** to Articles of Incorporation of

SEFENI GROUPING.

The name must be distinguishable and contain the word "corporation," "company," or "incorporated" or the abbreviation "Corp. "Inc.," or "Co.," A professional corporation name must contain the we "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   13605 SW 149 AVENUE	( <u>Name</u>	of Corporation as currently	filed with the Florida Der	pt. of State)	
Pursuant to the provisions of section 607,1006, Florida Statutes, this Florida Profit Corporation adopts the following amend its Articles of Incorporation:  A. If amending name, enter the new name of the corporation:  The manne must be distinguishable and contain the word "corporation," "company," or "incorporated" or the abbreviation "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:  Name of New Registered Agent  AVIER M. SANCHEZ  13605 SW 149 AVENUE  (City)  Florida  Signature, if changing Registered Agent:  1 hereby accept the appointment as registered agent. Tam familiar with and ascept the obligations of the position.		P09000029	212		
A. If amending name, enter the new name of the corporation:  The name must be distinguishable and contain the word "corporation," "company," or "incorporated" or the abbreviation "Corp. "Inc." or "Co." A professional corporation name must contain the we "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 MUST BE A STREET ADDRESS)  D. If amending the registered agent and/or registered office address in Florida, enter the name of the part of the new registered office address in Florida, enter the name of the part of the part of the part of the position.  New Registered Office Address:  MIAMI  Florida 33186  (City)  Florida 33186  (City)  New Registered Agent's Signature, if changing Registered Agent:  I hereby accept the appointment as registered agent. I am familiar with and ascept the obligations of the position.		(Document Number of	Corporation (if known)		
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 we reduce the abbreviation "P.A."  B. Enter new principal office address, if applicable: (Principal office 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:  Nome of New Registered Agent  New Registered Office Address:  MIAMI  New Registered Office Address:  New Registered Agent's Signature, if changing Registered Agent:  New Registered Agent's Signature, if changing Registered Agent:  I am familiar with and accept the obligations of the position.	Pursuant to the provisions of section 607 its Articles of Incorporation:	,1006, Florida Statutes, this F	lorida Profit Corporation :	adopts the following	ng amendment(s) to
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 we reduce the abbreviation "P.A."  B. Enter new principal office address, if applicable: (Principal office 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:  Nome of New Registered Agent  New Registered Office Address:  MIAMI  New Registered Office Address:  New Registered Agent's Signature, if changing Registered Agent:  New Registered Agent's Signature, if changing Registered Agent:  I am familiar with and accept the obligations of the position.	A. If amending name, enter the new n	ame of the corporation:			
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   JAVIER M. SANCHEZ	"Inc.," or Co.," or the designation "C	Corp, " "Inc," or "Co". A	ompany," or "incorporated professional corporation (	" or the abbreviati name must contai	_The new on "Corp" in the word
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   JAVIER M. SANCHEZ				·	
Name of New Registered Agent  New Registered Office Address:    New Registered Office Address:   Signature, if changing Registered Agent:   I hereby accept the appointment as registered agent.   I am familiar with and accept the obligations of the position.	(Mailing address <u>MAY BE A POST</u>	OFFICE BOX)		SECRETARY OF	FILE E
Name of New Registered Agent    Sanchez   13605 SW 149 AVENUE   (Florida street address)	new registered agent and/or the new	w registered office address:	88 in Piorida, enter the na	ime or the	
(Florida street address)  New Registered Office Address:  MIAMI  (City)  (City)  New Registered Agent's Signature, if changing Registered Agent:  I hereby accept the appointment as registered agent. I am familiar with and ascept the obligations of the position.		<del>-</del>			; }
New Registered Office Address:  (City)  (City)  New Registered Agent's Signature, if changing Registered Agent: I hereby accept the appointment as registered agent. I am familiar with and ascept the obligations of the position.		13605 SW 149 AVENUE		,	
New Registered Office Address:  (City)  Florida  (Zip Code)  New Registered Agent's Signature, if changing Registered Agent:  Thereby accept the appointment as registered agent. I am familiar with and ascept the obligations of the position.		(Florida stree	et address)	-	-
New Registered Agent's Signature, if changing Registered Agent:  I hereby accept the appointment as registered agent. I am familiar with and ascept the obligations of the position.	New Registered Office Address:			_, Florida	
I hereby accept the appointment as registered agent. I am familiar with and accept the obligations of the position.		(0	Ĵ(Ņ)	(Zip )	Zode)
Janus Janus	New Registered Agent's Signature, if c I hereby accept the appointment as regist	hanging Registered Agent: ered agent. I am familiar vei	th and accept the obligation	ns of the position.	
Signature of New Registered Agent, if changing		7	vistered Agent, if changing		_

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)

Add

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 Doc X Remove <u>V</u> Mike Jones $\underline{X}$ Add <u>SV</u> Sally Smith Type of Action Title Name <u>Address</u> (Check One) M. BLANCA LILIA SANCHEZ 13605 SW 149 AVENUE 1) \_\_\_\_ Change UNIT 3 \_\_\_ Add MIAMI, FLORIDA 33196 Remove PT JAVIER M. SANCHEZ 13605 SW 149 AVE \_\_\_ Change UNIT 3 \_\_\_\_ Add MIAMI, FLORIDA 33196 \_\_\_\_ Remove 3 ) \_\_\_\_ Change \_\_\_ Add \_\_ Remove Change \_\_\_\_ Add \_ Встоус 5) \_\_\_\_ Change Add \_\_ Remove Change

(Attach additional sheets, if necessary). (Be sp.	ecific)
	<del></del>
<del></del>	
	· · · · · · · · · · · · · · · · · · ·
-	
	n n n
<ol> <li>If an amendment provides for an exchange, re provisions for implementing the amendment</li> </ol>	eclassification, or cancellation of issued shares,
(if not applicable, indicate N/A)	it not contained in the amendment usen:
This document in to amend and certify the transfer of 100% of the	he shares owed by Blanca Lilia Sanchez to be transferred to
Javier Mauricio Sanchez the new President of Sefeni Group Inc.	. with Florida Document P09000029212 and also to be
updated to the Federal EIN No. 26-4582442 Under	Javier M. Sanchez,

. The duant of such	July 7, 2024	
date this documer		if other than the
Effective date if	August 21, 2024	
_	(no more than 90 days after amendment file date)	t there e
Note: If the date document's effect	e inserted in this block does not meet the applicable statutory filing requirements, this date will notive date on the Department of State's records.	t be listed as the
Adoption of Ame	endment(s) ( <u>CHECK ONE</u> )	
☐ The amendment action was not	nt(s) was/were adopted by the incorporators, or board of directors without shareholder action and sharequired.	reholder
The amendment by the shareho	nt(s) was/were adopted by the shareholders. The number of votes cast for the amendment(s) olders was/were sufficient for approval.	
☐ The amendmen	nt(s) was/were approved by the shareholders through voting groups. The following statement ately provided for each voting group entitled to vote separately on the amendment(s):	
"The nur	mber of votes cast for the amendment(s) was/were sufficient for approval	
bv	Blanca Lilia Sanchez	
-	(voting group)	
	JULY 7, 2024	
	Signature Placko Liliei School	
	(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)	
	Bloncalilia Sonchez (Typed or printed name of person signing)	
	Paesident	
	(Title of person signing)	