P10000002059

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COVER LETTER

TO: Amendment Section Division of Corporations NAME OF CORPORATION: PSICOFISICA, INC P10000002059 DOCUMENT NUMBER: The enclosed Articles of Amendment and fee are submitted for filing. Please return all correspondence concerning this matter to the following: RICARDO CARRERA Name of Contact Person METAFISICA INC Firm/ Company 8271 CRESPI BLVD # 4 Address MIAMI BEACH / FL 33141 City/ State and Zip Code rc@ricardocamera.com E-mail address: (to be used for future annual report notification) For further information concerning this matter, please call: RICARDO CARRERA Name of Contact Person Enclosed is a check for the following amount made payable to the Florida Department of State: S35 Filing Fee □\$43.75 Filing Fee & □\$43.75 Filling Fee & ☐\$52.50 Filing Fee Certified Copy Certificate of Status Certificate of Status (Additional copy is Certified Copy enclosed) (Additional Copy is enclosed) Mailing Address Street Address Amendment Section Amendment Section Division of Corporations Division of Corporations

P.O. Box 6327 Tallahassee, Ft. 32314 Clifton Building

2661 Executive Center Circle Tallahassee, FL 32301 TI FEB IN M 9: 25

Articles of Amendment to Articles of Incorporation of

	ly filed with the Florida Dept. of State)
P10000002059	
(Document Number o	of Corporation (if known)
Pursuant to the provisions of section 607.1006, Florida Statutes, this its Articles of Incorporation:	Florida Profit Corporation adopts the following amendment(s)
A. If amending name, enter the new name of the corporation:	
METAFISICA INC	The new
name must be distinguishable and contain the word "corporatio "Corp.," "Inc.," or Co.," or the designation "Corp.," "Inc." or t word "chartered," "professional association," or the abbreviation	on," "company;" or "incorporated" or the abbreviation "Co". A professional corporation name must contain the
B. Enter new principal office address, if applicable:	8271 CRESPI BLVD # 4
(Principal office address MUST BE A STREET ADDRESS)	MIAMI BEACH / FL 33141
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE ROX)	8321 CRECOLDEND # 4
(Mailing address MAY BE A POST OFFICE ROX)	8271 CRESPI BLVD # 4
	MIAMI BEACH / FL 33141
(Mailing address MAY BE A POST OFFICE ROX)	miami BEACH / FL 33141
(Mailing address MAY BE A POST OFFICE RON) D. If amending the registered agent and/or registered office add	miami BEACH / FL 33141
(Mailing address MAY BE A POST OFFICE RON) D. If amending the registered agent and/or registered office address new registered agent and/or the new registered office address	miami BEACH / FL 33141
(Mailing address MAY BE A POST OFFICE RON) D. If amending the registered agent and/or registered office address new registered agent and/or the new registered office address Name of New Registered Agent	miami BEACH / FL 33141
(Mailing address MAY BE A POST OFFICE RON) D. If amending the registered agent and/or registered office address Name of New Registered Agent	MIAMI BEACH / FL 33141 ress in Florida, enter the name of the St

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	<u>PT</u>	John Doe	
\underline{X} Remove	<u>V</u>	Mike Jones	
X Add	<u>sv</u>	Sally Smith	
Type of Action (Check One)	Title	<u>Name</u>	<u>Addres</u> s
1) Change	VP	SUSANA SANCHEZ	11510 NW 79th LN
Add			DORAL, FL 33178
X Remove			
2) X Change	P	RICARDO CARRERA	8271 CRESPI BLVD # 4
Add			MIAMI BEACH / FL 33141
Remove			
3) Change			
Add			
Remove			
4) Change			
Add			
Remove			
5) Change			
Add			
Remove			
6) Change			
Add			
Remove			

Attach additional sheets, if necessary).	(Be specific)	
		_
· -		
an amendment provides for an excha	nange, reclassification, or cancellation of issued shares,	
orovisions for implementing the amen (if not applicable, indicate N/A)	ndment if not contained in the amendment itself:	

	02/06/2017	
The date of each amendment(s) adop	otion:	, if other than t
date this document was signed.		
02/06/2 Effective date <u>if applicable</u> :	2017	
Biretive date it applicable.	(no more than 90 days after amendment f	file date)
Note: If the date inserted in this bloc document's effective date on the Depar	ck does not meet the applicable statutory filing requirement of State's records.	airements, this date will not be listed as t
Adoption of Amendment(s)	(<u>CHECK ONE</u>)	
The amendment(s) was/were adopte by the shareholders was/were suffice	ed by the shareholders. The number of votes cast for cient for approval.	the amendment(s)
☐ The amendment(s) was/were approx must be separately provided for ea	yed by the shareholders through voting groups. The j ch voting group entitled to vote separately on the an	following statement nendment(s):
"The number of votes east for	the amendment(s) was/were sufficient for approval	
by	(voting group)	
	(voting group)	
action was not required.	ed by the board of directors without shareholder action and by the incorporators without shareholder action an	
02/06/2017 Dated Signature		
(By a directed, b	etor, president or other officer – if directors or officer by an incorporator – if in the hands of a receiver, trust fiduciary by that fiduciary)	rs have not been tee, or other court
RI	CARDO CARRERA	
_	(Typed or printed name of person signing)	77=
PR	ESIDENT	
-	(Title of person signing)	