P10000041437

| (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



900361635269

08/22/21--01021--028 +*52.50

SECRETARY OF STATE

FILED 021 HAR 22 PM 2: 3

0 5

COVER LETTER

TO: Amendment Section

Division of Corporations

Tallahassee, FL 32314

NAME OF CORPORATION: Maredan inc. DOCUMENT NUMBER: P10000041437 The enclosed Articles of Amendment and fee are submitted for filing. Please return all correspondence concerning this matter to the following: Mayra Quinones Name of Contact Person Maredan Inc. Firm/ Company 2721 SW 137 AVE #103 Address Miami, Fl 33175 City/ State and Zip Code mayra@marcdan.com E-mail address: (to be used for future annual report notification) For further information concerning this matter, please call: at (786) 264-1765
Area Code & Daytime Telephone Number Mayra Quinones Name of Contact Person Enclosed is a check for the following amount made payable to the Florida Department of State: ☐\$43.75 Filing Fee & ☐\$43.75 Filing Fee & \$52.50 Filing Fee ☐ \$35 Filing Fee Certificate of Status Certificate of Status Certified Copy (Additional copy is Certified Copy enclosed) (Additional Copy is enclosed) Street Address **Mailing Address** Amendment Section Amendment Section Division of Corporations Division of Corporations The Centre of Tallahassee P.O. Box 6327

2415 N. Monroe Street, Suite 810

Tallahassee, FL 32303

Articles of Amendment to Articles of Incorporation of

FILED

| Maredan Inc. | 2021 | HAD 22 PM 2: 25 |
|--|--|--|
| (Name of Corporat | tion as currently filed with the Florid | |
| P10000041437 | | DREALANY OF STATE |
| (Docu | iment Number of Corporation (if know | mLA. ASSEC.FL |
| Pursuant to the provisions of section 607,1006, Floric its Articles of Incorporation: | | |
| A. If amonding name, enter the new name of the o | corporation: | |
| | | The new |
| name must be distinguishable and contain the word "e"Inc.," or Co.," or the designation "Corp," "Inc "chartered," "professional association," or the abbi | ;" or "Ca". A professional corpor | orated" or the abbreviation "Corp.," vation name must contain the word |
| B. Enter new principal office address, if applicable | | |
| (Principal office address MUST BE A STREET AD | ODRESS) | |
| | | |
| | | |
| C. Enter new mailing address, if applicable: | av. | |
| (Mailing address <u>MAY BE A POST OFFICE B</u> | <u></u> | |
| | | |
| | | |
| D. If amending the registered agent and/or regist | orod office address in Florida, enter | the name of the |
| new registered agent and/or the new registered | d office address: | |
| Name of New Registered Agent | | _ |
| The state of the s | | |
| | (Florida street address) | |
| N 0 1 107 111 | | . Florida |
| New Registered Office Address: | (City) | (Zip Code) |
| | | |
| | | |
| New Registered Agent's Signature, if changing Re Thereby a cept the appointment as registered agent. | egistered Agent: Lam tamiliar with and accept the ob- | divations of the position. |
| 1 петеру и геері іне арринітені их гедізисти идет. | Tam jamilar with and accept the sec | |
| | | |
| | | |
| Sig | nature of New Registered Agent, if che | inging |
| 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)

Example:

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> | John Doc | | |
|-------------------------------|--|-----------------|----------------------|--|
| X Remove | <u>V</u> | Mike Jones | | |
| X Add | <u>sv</u> | Sally Smith | | |
| Type of Action (Check One) | <u>Title</u> | <u>Name</u> | Address | |
| 1) Change | VD | Miguel Cabranes | 7261 SW 123 PL | |
| /.dd x Remove | | | Miami, FL 33183 | |
| 2) X Change | VS | Mayra Quinones | 2721 SW 137 AVE #103 | |
| Add | | | Miami, FL 33175 | |
| Remove 3) Range | <u>. </u> | | | |
| Add | | | | |
| Remove 4) X Change | PT | Jesus Quinones | 2721 SW 137 Ave #103 | |
| / .dd | | | Miami,FL 33175 | |
| Remove | | | | |
| 5) Change Add | | | | |
| Remove | | | | |
| 6) Change | | | | |
| Add | | | | |
| Remove | | | | |

| If amending or adding additional A (Attach additional sheets, if necessary | <u>rticles, enter cha</u>). (Be specific) | ange(s) here: | | | |
|--|--|--|--------------------------|--------------|--------------|
| Thange address for the registered agent to 2721 SW 137 AVE #103 Miami.Fl 33175 | | | | | |
| | | | | | |
| | | | | | |
| | | | | | |
| | | | | <u>-</u> | |
| | | | | | |
| | | | | | |
| | | | | | |
| | | | | | |
| | | | | <u> </u> | |
| | | | | | |
| | | | | | |
| | | | | | |
| | <u> </u> | | | | |
| _ | | | | | |
| | | | | | |
| | | | | | |
| | | | _ | | |
| | | | | | |
| | | | | | |
| | | | | | |
| | | | | | |
| | | | | | |
| If an amendment provides for an exprovisions for implementing the a | xchange, reclassi | ification, or ca | <u>incellation of is</u> | sued shares. | |
| (if not applicable, indicate N/A) | <u>menament it not</u> | Contained in | the amendmen | C Itacii. | |
| | N/A | | | | |
| | | | | | |
| | | | | | |
| | | | | | |
| | | | <u>,</u> | | |
| | | | | | . |
| | | <u>. </u> | | | |
| | | | | | |
| | | | | <u> </u> | |
| | | | | | |
| | | | | | |

| The date of each amendment(s) adoption: | , if other than th |
|---|---|
| date this document was signed. | |
| Effective date <u>if applicable</u> : | an 90 days after amendment file date) |
| | pplicable statutory filing requirements, this date will not be listed as the |
| Adoption of Amendment(s) (CHECK ONE) | |
| The amendment(s) was/were adopted by the incorporators action was not required. | , or board of directors without shareholder action and shareholder |
| ☐ The amendment(s) was/were adopted by the shareholders by the shareholders was/were sufficient for approval. | The number of votes east for the amendment(s) |
| ☐ The amendment(s) was/were approved by the shareholder must be separately provided for each voting group entitle | s through voting groups. The following statement and to vote separately on the amendment(s): |
| "The number of votes east for the amendment(s) wa | s/were sufficient for approval |
| by | <u> </u> |
| (voting group) | |
| 03/18/2021 Dated | |
| Signature (By a director, president or other selected, by an incorporator – if appointed fiduciary by that fidu | officer – if directors or officers have not been in the hands of a receiver, trustee, or other court ciary) |
| Jesus Quinones | |
| (Typed or pro | nted name of person signing) |
| President | |
| (Title of pers | on signing) |