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COVER LETTER

TO: Amendment Section Division of Corporations

NAME OF CORPORATION:	PROSPERITY IN	IVESTMENT CORP				
OCUMENT NUMBER: P10000080775						
The enclosed Articles of Amena	<i>lment</i> and fee are su	abmitted for filing.				
Please return all correspondence	concerning this ma	itter to the following:				
ALFRED	MANZUR					
		Name of Contact Person	 n			
PROSPI	ERITY INVESTME		•			
	ETATT MAY ESTATE					
		Firm/ Company				
6087 SV	CORAL WAY					
		Address	-			
MIAMI F	L 33155					
		City/ State and Zip Cod	e			
	~					
urbanmgt890(-					
E-ma	ail address: (to be u	sed for future annual report	notification)			
For further information concerni	ng this matter, pleas	se call:				
Mary Perea Nats Financial Accounting		305	222-1280			
Name of Contact Person		Area Co	de & Daytime Telephone Number			
Enclosed is a check for the follo	wing amount made	payable to the Florida Depa	artment of State:			
-	3.75 Filing Fee & rtificate 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 Tallahassee, FL 32314		Street Address Amendment Section Division of Corporations Clifton Building 2661 Executive Center Circle				

Tallahassee, FL 32301

Articles of Amendment to Articles of Incorporation of

PROSPERITY INVESTMENT CORP

(Name of Corporation as curr	ently filed with the Florida Dept. of State)
P10000080775	
(Document Numb	er of Corporation (if known)
Pursuant to the provisions of section 607.1006, Florida Statutes, its Articles of Incorporation:	this Florida Profit Corporation adopts the following amendment(s) to
A. If amending name, enter the new name of the corporation	<u>:</u>
name must be distinguishable and contain the word "corpor" "Corp.," "Inc.," or Co.," or the designation "Corp," "Inc," word "chartered," "professional association," or the abbreviation	or "Co". A professional corporation name must contain the
B. Enter new principal office address, if applicable: (Principal office address <u>MUST BE A STREET ADDRESS</u>)	
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 a new registered agent and/or the new registered office add	
Name of New Registered Agent	
(Florid	a street address)
New Registered Office Address:	City) , Florida (Zip Code)
New Registered Agent's Signature, if changing Registered Ag I hereby accept the appointment as registered agent. I am famil. Signature of New York Property Signature of New York Property Signature Signatur	

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 Do	<u>oe</u>	
X Remove	<u>V</u>	Mike Jo	<u>ones</u>	
X Add	<u>SV</u>	Sally Sr	<u>mith</u>	
Type of Action (Check One)	<u>Title</u>		<u>Name</u>	Address
X Change	S		FRANCISO REYNOSA	890 SW 87th AVENUE #10
Add				MIAMI , FL 33174
Remove				
2) Change	s		JESUS FRANCISCO REYNOSA	890 SW 87th AVENUE #10
X Add		_		MIAMI, FL 33174
Remove				
3) Change				
Add				
Remove				
4) Change		_		
Add				
Remove				
5) Change				
Add				
Remove				
O Ch				
6) Change		_		
Add				
Remove				

	(Be specific)			
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C				
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provisions for implementing the ame	nange, reclassification ndment if not conta	ined in the amendn	nent itself:	
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provisions for implementing the ame	nange, reclassification and ment if not conta	ined in the amendn	ent itself:	

The date of each amendment(s)	adoption;	, if other than the
date this document was signed.		
U/ Effective date <u>if applicable</u> :	/17/2018	
meetive date it applicable.	(no more than 90 days after amendment file date)	<u> </u>
Note: If the date inserted in this document's effective date on the E	block does not meet the applicable statutory filing requirements, this date bepartment of State's records.	will not be listed as the
Adoption of Amendment(s)	(CHECK ONE)	
■ The amendment(s) was/were ad by the shareholders was/were s	dopted by the shareholders. The number of votes east for the amendment(s) sufficient for approval.	
	oproved by the shareholders through voting groups. The following statement reach voting group entitled to vote separately on the amendment(s):	t
"The number of votes cas	t for the amendment(s) was/were sufficient for approval	
by	•	
	(voting group)	
☐ The amendment(s) was/were action was not required.	lopted by the board of directors without shareholder action and shareholder	
☐ The amendment(s) was/were action was not required.	lopted by the incorporators without shareholder action and shareholder	
Dated	31/2018	
Signature	/ JUNE	
select	director, president or other officer – if directors or officers have not been ed, by an incorporator – if in the hands of a receiver, trustee, or other court nted fiduciary by that fiduciary)	
	ALFRED MANZUR	
	(Typed or printed name of person signing)	
	PRESIDENT	
	(Title of person signing)	