P10000099131

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SECRETARY OF STATE

COVER LETTER

TO: Amendment Section Division of Corporations

NAME OF CORPORAT	ION: Mabe	l's Place G	orp,
DOCUMENT NUMBER	: P100000	l's Place G 99131	1
The enclosed Articles of A			
Please return all correspon	dence concerning this ma	tter to the following:	
<u></u>	Conzalo	Perez Ir Esc	<u>.</u>
		Name of Contact Person	1
	6 Joseph	Perez Jr P 11	
	7 (rune Company	
	1915 W	Address	
		F1 22.55	e
	Mam	City/ State and Zip Code	 ಲ
For further information co		sed for future annual report se call:	notification)
Conzalo	Perez Jr.	at (305	de & Daytime Telephone Number
Name of C	ontact Person	Area Co	de & Daytime Telephone Number
Enclosed is a check for the	e following amount made	payable to the Florida Depa	artment of State:
\$35 Filing Fee	☐\$43.75 Filing Fee & Certificate of Status	S43.75 Filing Fee & Certified Copy (Additional copy is enclosed)	S52.50 Filing Fee Certificate of Status Certified Copy (Additional Copy is enclosed)
	Address		Address
Amendment Section Division of Corporations		Amendment Section Division of Corporations	
P.O. Box 6327		The Co	entre of Tallahassee
Tallahassee, FL 32314		2415 1	V. Monroe Street, Suite 810

Tallahassee, FL 32303

Articles of Amendment to Articles of Incorporation

FILED

MABEL S PLACE, CORP.		2021 FEB 15 PM 12: FO
(<u>Name</u> c	of Corporation as curren	tly filed with the Florida Dept. of State 12. 52
P10000099131		SECRETARY OF STATE
	(Document Number	of Corporation (if known)
Pursuant to the provisions of section 607, its Articles of Incorporation:	1006, Florida Statutes, this	s Florida Profit Corporation adopts the following amendment(s) to
A. If amending name, enter the new na	ame of the corporation:	
		<i>T</i> 1
name must be distinguishable and contain "Inc.," or Co.," or the designation "C "chartered," "professional association."	Corp," "Inc," or "Co".	Thenew "company," or "incorporated" or the abbreviation "Corp.," A professional corporation name must contain the word ."
B. Enter new principal office address, if applicable: (Principal office address <u>MUST BE A STREET ADDRESS</u>)		3470 E COAST AVE, APART 2105
		MIAMI, FL 33137
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)		3470 E COAST AVE, APART 2105
· · · · · · · · · · · · · · · · · · ·		MIAMI, FL 33137
D. If amending the registered agent ar		
new registered agent and/or the new		<u> </u>
Name of New Registered Agent VICTOR ALVAREZ		
	3470 E COAST AVE, AI	PART 2105
,	(Florida s	treet address)
New Registered Office Address;	MIAMI	, Florida
	-	(City) (Zip Code)
New Registered Agent's Signature, if c I hereby accept the appointment as regist		tt: with and accept the obligations of the position.
	Victor Al	geor M.
		Registered Agent, if changing

Check if applicable

☐ 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 Doe	
X Remove	<u>V</u>	Mike Jones	
X Add	<u>sv</u>	Sally Smith	
Type of Action (Check One)	Title	<u>Name</u>	Address
1) Change	PD	MABEL CORO	
Add X Remove			
2) Change	VPD	FELIX CORO	
$ \begin{array}{c} $	מין	VICTOR ALVAREZ	3470 E COAST AVE, APART 210 MIAMI, FL 33137
Remove 4)ChangeAdd			
Remove 5) Change Add			
Remove 6) Change Add Remove			
REHIOVE			

	(Be specific)	
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,, <u> </u>		
f an amandment provides for an exch	nnas reclussification or cancellation of issued charas	
If an amendment provides for an exchange for implementing the ame	ange, reclassification, or cancellation of issued shares,	
provisions for implementing the ame	ange, reclassification, or cancellation of issued shares, ndment if not contained in the amendment itself:	
f an amendment provides for an exclusions for implementing the ame (if not applicable, indicate N/A)	ange, reclassification, or cancellation of issued shares, ndment if not contained in the amendment itself:	
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JANUARY	
The date of each amendment(s) adoption:date this document was signed.	, if other than the
Effective date <u>if applicable</u> :	
(no mo	re than 90 days after amendment file date)
Note: If the date inserted in this block does not meet t document's effective date on the Department of State's r	the applicable statutory filing requirements, this date will not be listed as the records.
Adoption of Amendment(s) (CHECK O	<u>NE</u>)
☐ The amendment(s) was/were adopted by the incorpor action was not required.	ators, or board of directors without shareholder action and shareholder
■ The amendment(s) was/were adopted by the sharehol by the shareholders was/were sufficient for approval.	
☐ The amendment(s) was/were approved by the shareho must be separately provided for each voting group en	
"The number of votes cast for the amendment(s) was/were sufficient for approval
hy	
hy(voting group	n)
Dated 01/29/2021 Signature Victor 1	Hyra U.
(By a director, president or o	other officer – if directors or officers have not been – if in the hands of a receiver, trustee, or other court fiduciary)
Victor	ALVANEZ
(Typed o	r printed name of person signing)
Pnes	NEUT
(Title of	person signing)

. . . .