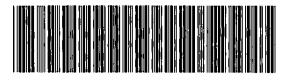
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S. PRATHER

COVER LETTER

TO: Amendment Section Division of Corporations

NAME OF CORPORATION: VICTORIAN	O BATISTA INC	
DOCUMENT NUMBER:P11000004884		
The enclosed Articles of Amendment and fee	are submitted for filing.	
Please return all correspondence concerning th	nis matter to the following:	
VICTORIANO BATIS	STA	
	Name of Contact Person	
VICTORIANO BATI	ISTA INC	
	Firm/ Company	,
20137 NW 36 CT		
	Address	· · · · · · · · · · · · · · · · · · ·
MIAMI GARDENS FL	. 33056	
	City/ State and Zip Code	;
victorianobatist	@aol.com	
E-mail address: (to	be used for future annual report	notification)
For further information concerning this matter,	, please call:	
VICTORIANO BATISTA	at (305	992-9537 le & Daytime Telephone Number
Name of Contact Person	Area Coo	le & Daytime Telephone Number
Enclosed is a check for the following amount r	made payable to the Florida Depa	rtment of State:
□ \$35 Filing Fee □\$43.75 Filing Fe Certificate of Sta	_	\$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	Amend Division Clifton	Address ment Section n of Corporations Building secutive Center Circle

Tallahassee, FL 32301

Articles of Amendment to Articles of Incorporation of

VICTORIANO BATISTA INC,

(Name of Corporation as curren	tly filed with the Florida Dept. of Stat	<u>e</u>)
	of Co	
·	of Corporation (if known)	
Pursuant to the provisions of section 607.1006, Florida Statutes, this Articles of Incorporation:	s Florida Profit Corporation adopts the	following amendment(s)
A. If amending name, enter the new name of the corporation:		
		The new
name must be distinguishable and contain the word "corporati "Corp.," "Inc.," or Co.," or the designation "Corp," "Inc," or word "chartered," "professional association," or the abbreviation	"Co". A professional corporation nan	or the abbreviation ne must contain the
B. Enter new principal office address, if applicable:	20137 NW 36TH CT	
Principal office address <u>MUST BE A STREET ADDRESS</u>)	MIAMI GARDENS FL 33056	
	-	Ā¢ →
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)	20137 NW 36TH CT	
	MIAMI GARDENS FL 33056	
 If amending the registered agent and/or registered office addresses registered agent and/or the new registered office addresses 		<u> </u>
———·	· · ·	
Name of New Registered Agent		
(Florida s	treet address)	
·		
New Registered Office Address:	(City), Florida	(Zip Code)
low Degistered Acent's Signature if shancing Desistered Acent	4 -	
lew Registered Agent's Signature, if changing Registered Agen hereby accept the appointment as registered agent. I am familiar	vith and accept the obligations of the po	osition.

Signature of New	Registered Agent if changing	

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.

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)	<u>Title</u>	<u>Name</u>	Address
1) Change			
Add			
Remove			
2) Change		_	
Add			
Remove			
3) Change			
Add			
Remove			
4) Change		.	
Add			
Remove		-	
5) Change		· · · · · · · · · · · · · · · · · · ·	
Add			
Remove			
6) Change			
Add			
Remove			

Attach a	ling or adding additional Art dditional sheets, if necessary).	ticles, enter change(s) here: (Be specific)
provisio	endment provides for an excl ons for implementing the ame not applicable, indicate N/A)	hange, reclassification, or cancellation of issued shares, endment if not contained in the amendment itself:
-		
<u> </u>		

The date of each amendment(s) adoption:	, if other than the
Effective date if applicable:	
(no more than 90 days after amendment file date)	
Note: If the date inserted in this block does not meet the applicable statutory filing requirements, this date document's effective date on the Department of State's records.	will not be listed as the
Adoption of Amendment(s) (CHECK ONE)	
The amendment(s) was/were adopted by the shareholders. The number of votes cast for the amendment(s) by the shareholders was/were sufficient for approval.	
☐ The amendment(s) was/were approved by the shareholders through voting groups. The following statement must be separately provided for each voting group entitled to vote separately on the amendment(s):	
"The number of votes cast for the amendment(s) was/were sufficient for approval	
by" (voting group)	
(voting group)	
☐ The amendment(s) was/were adopted by the board of directors without shareholder action and shareholder action was not required.	1
☐ The amendment(s) was/were adopted by the incorporators without shareholder action and shareholder action was not required.	T MAY
Dated 05 15 2017 Signature + Nofonino Bets 5,	TARY OF ASSEE.
Signature + Notonino Bets 5,	
(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)	25
Victoriano Batista	
(Typed or printed name of person signing)	
President	
(Title of person signing)	