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To:

Division of Corporations

Fax Number

: (850)617-6380

From:

Account Name

: KIJOENNA SERVICES INC

Account Number : I20080000033

: (305)644-3055

Phone Fax Number

: (305)644-3052

Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please.

| Email | Address: | | | |
|-------|----------|--|--|--|
| | | | | |

COR AMND/RESTATE/CORRECT OR O/D RESIGN MECHITA CORP.

OCT 26 2016

R. WHILE

| Certificate of Status | 0 |
|-----------------------|---------|
| Certified Copy | 0 |
| Page Count | 01 |
| Estimated Charge | \$35.00 |

COVER LETTER

| TO: Amendment Sec Division of Cor | | | |
|--|---|--|--|
| NAME OF COPP | PRATION: MECHITA CORP. | | |
| NAME OF CORP | P11000020510 | | |
| DOCUMENT NUM | IBER: P11000020510 | | <u> </u> |
| The enclosed Article | es of Amendment and fee are sul | omitted for filing. | |
| Please return all con | espondence concerning this mat | ter to the following: | |
| | ENNA DIEPPA | , | |
| | | Name of Contact Person | <u> </u> |
| | KIJOENNA SERVICES, INC | 5 | • |
| | | Firm/ Company | |
| | 2141 SW 1ST STREET SUM | TE 110 | |
| | , | Address | |
| | MIAMI, FL 33135 | | |
| | | City/ State and Zip Code | ; |
| VD | ISJOENNA@YAHOO.COM | | |
| | = | sed for future annual report | notification) |
| | D | | , |
| For further informat | ion concerning this matter, pleas | e call: | |
| enna dieppa | | at (<u>786</u> | 4997132 de & Daytime Telephone Number |
| Nam | e of Contact Person | Area Co | de & Daytime Telephone Number |
| Enclosed is a check | for the following amount made | payable to the Florida Depa | rtment of State: |
| □ \$35 Filing Fee | ■\$43.75 Filing Fee & Certificate of Status | S43.75 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 Tailahassee, FL 32314 | | Amend Divisio Clifton 2661 B | Address ment Section n of Corporations Building xecutive Center Circle ssee, FL 32301 |

16 OCT 25 AM 9: 05

Articles of Amendment to Articles of Incorporation of

SECPETANT OF TAKE

| MECHITA CORP. | | • | | |
|--|--|--|--|--|
| (Name o | of Corporation as current | ly filed with the Florida Dept. of State) | | |
| P11000020510 | | | | |
| | (Document Number o | f Corporation (if known) | | |
| Pursuant to the provisions of section 607. ts Articles of Incorporation: | 1006, Florida Statutes, this | Florida Profit Corporation adopts the following amendment(s) to | | |
| . If amending name, enter the new na | me of the corporation: | | | |
| J/A. | | The new | | |
| name must be distinguishable and con "Corp.," "Inc.," or Co.," or the design word "chartered," "professional associa | ation "Corp," "Inc," or | on," "company," or "incorporated" or the abbreviation "Co". A professional corporation name must contain the | | |
| 3. Enter new principal office address, | if annlicables | N/A | | |
| Principal office address <u>MUST BE A S</u> | | | | |
| | | | | |
| | | | | |
| Enter new mailing address, if appli (Mailing address MAY BE A POST) | | N/A | | |
| | | | | |
|). If amending the registered agent an new registered agent and/or the ner | d/or registered office add v registered office addres | ress in Florida, enter the name of the s: | | |
| Name of New Registered Agent | DOMINGO PIRA | | | |
| | 5009 HAYES ST | | | |
| | (Florida se | reet address) | | |
| New Registered Office Address: | HOLLYWOOD . | Florida 33021 | | |
| The Action of the Office of the Control of the Cont | | (Cib) (Zip Code) | | |
| New Registered Agent's Signature, if cl hereby accept the appointment as regist | nanging Registered Agent ered agent. I am familiar | : with and accept the obligations of the position. | | |
| D | F minime | റ്റുത | | |
| | Signature of New I | 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 | PT | John De | <u>oe</u> | | |
|-------------------------------|----------------|-------------|---------------|----------|---------------------------------------|
| X Remove | <u>v</u> | Mike Jo | <u>ones</u> | | |
| _X Add | <u>sy</u> | Sally S | mith_ | | |
| Type of Action (Check One) | <u>Title</u> | | Name | | <u>Addres</u> s |
| 1) Change | VP | | IVELISSE PIRA | <u>-</u> | 5009 HAYES STREET |
| Add | | | | | HOLLYWOOD, FL 33021 |
| X Remove | | | | | |
| 2) Change | | _ | | | |
| Add | | | | | |
| . Remove | | | | | |
| 3) Change | | | - | | |
| Add | | | | | · · · · · · · · · · · · · · · · · · · |
| Remove | | | | | |
| 4) Change | | | | | |
| Add | | | | | |
| Remove | | | | | |
| 5) Change | | | | | |
| Add | | | | <u> </u> | |
| Remove | | | | | |
| | | | | | |
| 6) Change | - ~ | | | <u></u> | |
| Add | | | | | |
| Remove | | | | | |

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KIJOENNA

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| | 10/25/2016 | |
|---|--|--|
| The date of each amendment(s) ad- | | , if other than th |
| date this document was signed. | | |
| | /2016 | |
| Effective date if applicable: | (no more than 90 days after | amendment file date) |
| | ino more inan 90 days after | amenument file uute) |
| Note: If the date inserted in this bl document's effective date on the Dep | | ory filing requirements, this date will not be listed as the |
| Adoption of Amendment(s) | (CHECK ONE) | |
| ☐ The amendment(s) was/were adop by the shareholders was/were suf | nted by the shareholders. The number of ficient for approval. | votes cast for the amendment(s) |
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| "The number of votes east f | or the amendment(s) was/were sufficient | for approval |
| by | | ," |
| • | (voting group) | |
| The amendment(s) was/were adopaction was not required. | eted by the board of directors without sha | areholder action and shareholder |
| ☐ The amendment(s) was/were adopaction was not required. | sted by the incorporators without shareho | older action and shareholder |
| 10/25/2016 | | |
| Dated | | · |
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| | Domingo time | |
| | rector, president or other officer - if dire | |
| | , by an incorporator - if in the hands of a | a receiver, trustee, or other court |
| appoint | ed fiduciary by that fiduciary) | |
| | DOMINGO PIRA | |
| • | (Typed or printed name of per | rson signing) |
| : | PRESIDENT | |
| - | (Title of person si | gning) |