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COVER LETTER

TO: Amendment Section

Division of Corpo			
NAME OF CORPOR	BER: <u>P11 0000</u>	okus Sipum	paklet Inc
DOCUMENT NUME	BER: <u>VII 000</u> 0	0 58307	
The enclosed Articles	of Amendment and fee are su	abmitted for filing.	
Please return all corres	spondence concerning this ma	tter to the following:	
	Edward	Proneuso	
	Edward Mißbudga 2200 Sm. Unbredu	Name of Contact Person Supermon	Let INC
	2200 Sm	Firm/Company Hy: Cory B	lad
	Unlawedo	Address Clark 3	2 836
		City/ State and Zip Cod	e
		sed for future annual report	notification)
	oconcerning this matter, pleas		
Edwar	d Truncosu	at (407	de & Daytime Telephone Number
Name o	of Contact Person	Area Co	de & Daytime Telephone Number
Enclosed is a check for	r the following amount made	payable to the Florida Depa	artment of State:
E S35 Filing Fee	□S43.75 Filing Fee & Certificate 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)
	ling Address ndment Section		Address Iment Section

Division of Corporations

2661 Executive Center Circle Tallahassee, FL 32301

Clifton Building

Division of Corporations

Tallahassee, FL 32314

P.O. Box 6327

Articles of Amendment to

Articles of Incorporation

Mi Bondere Super	monket Inc		
	ntly filed with the Florida Dept. of State	<u> </u>	
P116000 5830	クフ		
(Document Number	r of Corporation (if known)		
Pursuant to the provisions of section 607.1006, Florida Statutes, th its Articles of Incorporation:	is Florida Profit Corporation adopts the	following amendme	ent(s) to
A. If amending name, enter the new name of the corporation:			
		The new	
name must be distinguishable and contain the word "corporate "Corp.," "Inc.," or Co.," or the designation "Corp." "Inc.," or word "chartered," "professional association," or the abbreviation B. Enter new principal office address, if applicable: (Principal office address MUST BE A STREET ADDRESS)	" "Co". A professional corporation nam		
(Trincipal office address <u>stout he A STREET ADDRESS</u>)			
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)	~/ <u>\</u>	STEAL MILES	77
		PH 1: 0	ED
D. If amending the registered agent and/or registered office ad new registered agent and/or the new registered office address.		112 (M)	
Name of New Registered Agent			
(Florida .	street address)		
New Registered Office Address:	, Florida		
	(Ciņ')	(Zip Code)	
New Registered Agent's Signature, if changing Registered Agent I hereby accept the appointment as registered agent. I am familia		osition.	
	刈 × Registered Agent, if changing		
Signature of New	v 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 I	loc	
X Remove	<u>V</u> <u>Mike J</u>	Jones .	
X Add	SV Sally S	Smith	
Type of Action (Check One)	Title	<u>Name</u>	<u>Addres</u> s
1) KChange	<u>VP</u>	FRANCISCO ROSDRIU	2200 Americans Blo
Add			Orbude Anian 32839
Remove			
2) Khange	<u>P</u>	Edward (non cusu	Orlando Anda 32839
Add			Chloude Marks 32839
Remove			
3) Change			
Add			
Remove			
4) Change			
Add			
Remove			
5) Change			
Add			
Remove			
6) Change			
Add			
Romana			

If an amendment provides for an exchange, reclassification, or cancellation of issued shares, provisions for implementing the amendment if not contained in the amendment itself: (if not applicable, indicate N/A)	Attach <i>addit</i>	g or adding additional Articles, enter change(s) here: itional sheets, if necessary). (Be specific)	
If an amendment provides for an exchange, reclassification, or cancellation of issued shares, provisions for implementing the amendment if not contained in the amendment itself: (if not applicable, indicate N/A)		$\mathcal{A}/_{\wedge}$	
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The date of each amendment(s) adoption: Lseyos + 29, 2007, if other than the
date this document was signed.
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 will not be listed as the document's effective date on the Department of State's records.
Adoption of Amendment(s) (<u>CHECK ONE</u>)
The amendment(s) was/were adopted by the shareholders. The number of votes east 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 east for the amendment(s) was/were sufficient for approval
by
(voting group)
☐ The amendment(s) was/were adopted by the board of directors without shareholder action and shareholder action was not required.
☐ The amendment(s) was/were adopted by the incorporators without shareholder action and shareholder action was not required.
Dated August 29, 2017
Signature College
(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)
Edward (nonceso
(Typed or printed name of person signing)
President
(Title of person signing)