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COVER LETTER

TO: Amendment Section Division of Corporations

NAME OF CORPORATION: CASA MOLLER USA INC

DOCUMENT NUMBER: P12000004340

The enclosed Articles of Amendment and fee are submitted for filing.

Please return all correspondence concerning this matter to the following:

Sandra Blanco Cerqueira

Name of Contact Person

CASA MOLLER USA INC

Firm/ Company

175 SW 7 Street Unit 1810

Address

Miami, FL 33130

City/ State and Zip Code

s.casamollerusa@gmail.com

E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Sandra Blanco Cerqueira	at (<u>305</u>)	9345811
Name of Contact Person	Area Code &	è Daytime Telephone Number

Enclosed is a check for the following amount made payable to the Florida Department of State:

\$35 Filing Fee

S43.75 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)

Mailing Address

Amendment Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314 <u>Street Address</u> Amendment Section Division of Corporations The Centre of Tallahassee 2415 N. Monroe Street, Suite 810 Tallahassee, FL 32303

Articles of Amendment to Articles of Incorporation of

CASA MOLLER USA INC

(Name of Corporation as currently filed with the Florida Dept. of State)

P12000004340

(Document Number of Corporation (if known)

Pursuant to the provisions of section 607,1006, Florida Statutes, this *Florida Profit Corporation* adopts the following amendment(s) to its Articles of Incorporation:

A. If amending name, enter the new name of the corporation:

PRIVATE PROJECTS_INC_

The new name must be distinguishable and contain the word "corporation," "company," or "incorporated" or the abbreviation "Corp.," "Inc.," or "Co.," or the designation "Corp.," "Inc.," or "Co". A professional corporation name must contain the word "chartered," "professional association." or the abbreviation "P.A."

B. Enter new principal office address, if applicable: (Principal office address MUST BE A STREET ADDRESS)

175 SW 7 Street Unit 1810

() () () () () () () () () () () () () (Miami, FL 33130	
		NON 6102
C. <u>Enter new mailing address, if applicable:</u> (Mailing address <u>MAY BE A POST OFFICE BOX</u>)	175 SW 7 Street Unit 1810	· 22
	Miami, FL 33130	- TP 101
		ي ب
D. If amending the registered agent and/or registered office :		で <u>合</u> 、 3 4
new registered agent and/or the new registered office add <u>Name of New Registered Agent</u> N/A	<u>ress:</u>	
(Floria	la street address)	
New Registered Office Address;	, Florida	
	(City)	(Zip Code)

New Registered Agent's Signature, if changing Registered Agent:

I hereby accept the appointment as registered agent. I am familiar with and accept the obligations of the position.

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 = ChiefExecutive 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:

<u>X</u> Change	<u>PT Jot</u>	<u>in Doe</u>	
X Remove	<u>V Mi</u>	<u>ke Jones</u>	
<u>X</u> Add	<u>SV</u> <u>Sa</u>	Ilv Smith	
Type of Action	Title	<u>Name</u>	<u>Addres</u> s
(Check One)	GM	SCHUMACHER, AVIHU	55 MERRICK WAY NO 813
1) Change			CORAL GABLES, FL 33134
Add XRamour			
2) Change			
Add			
3) Remove	_ _		
Add			
Remove			
4) Change			<u> </u>
Add			
Remove			
5) Change			
Add			
Remove			
6) Change			

_ Add

___ Remove

Page 2 of 4

E. If amending or adding additional Articles, enter change(s) here: (Attach additional sheets, if necessary). (Be specific)

	-			
provisions for implementing th	e amendment if not co	ation, or cancellatio intained in the amen	<u>n of issued shares,</u> dment itself:	
F. If an amendment provides for a provisions for implementing th (if not applicable, indicate N N/A	e amendment if not co	ation, or cancellatio intained in the amen	<u>n of issued shares,</u> dment itself:	
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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 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

		••
1.1		•
by.		
	A DESCRIPTION OF A DESCRIPTION	
	(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 11/22/2019 Signature-

(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)

SANDRA BLANCO CERQUEIRA

(Typed or printed name of person signing)

VP

(Title of person signing)