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Special Instructions to	Filing Officer:	
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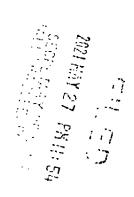
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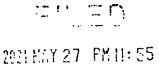


TO: Amendment Section Division of Corporations

NAME OF CORPOR	RATION: CLE Marketing, In	e				
DOCUMENT NUMI	P12000031704					
The enclosed Articles	of Amendment and fee are su	bmitted for filing.				
Please return all corres	spondence concerning this mat	ter to the following:				
	Caridad Cabrera					
		Name of Contact Perso	n			
	Tabacalears Unidas, Inc.					
		Firm/ Company				
	4650 NW 74th Ave					
Address						
	Miami FL 33166					
	· · · · · · · · · · · · · · · · · · ·	City/ State and Zip Cod	<u>-</u>			
cary(a)tabacalerasunidas.com					
		ed for future annual report	notification)			
For further information	concerning this matter, please	e call: at (514.0244			
Name of Contact Person) de & Daytime Telephone Number			
Enclosed is a check for	the following amount made p		·			
□ \$35 Filing Fee	□\$43.75 Filing Fee & Certificate of Status	\$43.75 Filing Fee & Certified Copy (Additional copy is enclosed)	Z\$52.50 Filing Fee Certificate of Status Certified Copy (Additional Copy is enclosed)			
Ame Divis P.O.	ing Address ndment Section sion of Corporations Box 6327 hassee, FL 32314	Amend Divisio Clifton	Address ment Section on of Corporations Building xecutive Center Circle			

Tallahassee, FL 32301

Articles of Amendment to Articles of Incorporation of



CLE Marketing, Inc. (Name of Corporation as currently filed with the Florida Dept. of State) CLE Marketing, Inc. P12000031704 (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: 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) C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OF FICE BOX) D. If amending the registered agent and/or registered office address in Florida, enter the name of the new registered agent and/or the new registered office address: Name of New Registered Agent (Florida street address) New Registered Office Address: __ 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 = 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.

Example: X Change	<u>PT</u>	John Doe	
X Remove	$\underline{\mathbf{V}}$	Mike Jones	
X Add	<u>sv</u>	Sally Smith	
Type of Action (Check One)	<u>Title</u>	<u>Name</u>	<u>Addres</u> s
1) Change	S	Caridad Cabrera	4650 NW 74th Ave
X Add			Miami FL 33166
Remove			
2) Change			
Add			
Remove			
3) Change		_	
Add			-
Remove			
4) Change		_	
Add			
Remove			
5) Change			
Add			
Remove			
			-
6) Change		_	
Add			
Remove			

The second secon	ticles, enter change(s) here: (Be specific)
	-
f an amendment provides for an exch	hange, reclassification, or cancellation of issued shares, endment if not contained in the amendment itself:
(if not applicable, indicate N/A)	riginent it not contained in the amendment usen:
the state of the s	

The date of each amendment(s) adoption:	, if other than the
date this document was signed.	
Effective date if applicable:	
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 document's effective date on the Department of State's records.	s date will not be listed as the
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 by the shareholders was/were sufficient for approval.	ent(s)
☐ The amendment(s) was/were approved by the shareholders through voting groups. The following state must be separately provided for each voting group entitled to vote separately on the amendment(s):	ement
"The number of votes cast 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.	older
☐ The amendment(s) was/were adopted by the incorporators without shareholder action and shareholder action was not required.	
May 3rd, 2021 Dated	
Signature	
(By a director president or other officer if directors or officers have not be	
selected, by an incorporator – if in the hands of a receiver, trustee, or other of appointed fiduciary by that fiduciary)	ourt
Christia L Eiroa MATISHIN CITO	
(Typed or printed name of person signing)	
President Prisident	
(Title of person signing)	