## P120000 67111

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## **COVER LETTER**

**TO:** Amendment Section Division of Corporations

NAME OF COR	PORATION: FILDUD ENTER	PRISES INC	
	UMBER: P12000067111		
	cles of Amendment and fee are so	ubmitted for filing.	
Please return all c	orrespondence concerning this m	atter to the following:	
	DIOSVANY JIMENEZ		
	<del></del>	Name of Contact Person	<u> </u>
	FILDUD ENTERPRISES IN	√C	
		Firm/ Company	
	18255 NW 68TH AVE APT		
		Address	
	HIALEAH FL 33015		
		City/ State and Zip Code	e
For further inforn	E-mail address: (to be u	sed for future annual report ase call:	notification)
DIOSVANY JIM	ENEZ	at (	546-4183
Na	ime of Contact Person	Area Co	de & Daytime Telephone Number
Enclosed is a chec	ck for the following amount made	payable to the Florida Depa	artment of State:
S35 Filing Fe	e S43.75 Filing Fee & Certificate of Status	□\$43.75 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	Amend Divisio The C	Address Iment Section on of Corporations entre of Tallahassee N. Monroe Street, Suite 810

Tallahassee, FL 32303

## Articles of Amendment Articles of Incorporation

of

FILDUD ENTERPRISES INC	`	
(Name of Corporation as cu	rrently filed with the Florida Dept. of State)	
P12000067111	rrently filed with the Florida Dept. of State)	4.
(Document Nur	nber of Corporation (if known)	0/
Pursuant to the provisions of section 607.1006, Florida Statute its Articles of Incorporation:	s, this Florida Profit Corporation adopts the following amendmen	nt(s) t
A. If amending name, enter the new name of the corporati	on:	
	The new	
	on," "company," or "incorporated" or the abbreviation "Corp.," o". A professional corporation name must contain the word "P.A."	
B. Enter new principal office address, if applicable:	18255 NW 68TH AVE APT 414	
(Principal office address MUST BE A STREET ADDRESS)	HIALEAH FL 33015	
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)	18255 NW 68TH AVE APT 414	
- UMBRORY BUBIESS MALDE A FUST OFFICE DUAL		
(Maining dauress MAT BE A FOST OFFICE BOX)	HIALEAH FL 33015	
(Mulling dudress MAT BE A FOST OFFICE BOX)	HIALEAH FL 33015	
(Mulling duaress MAT BE A FOST OFFICE BOX)	HIALEAH FL 33015	
D. If amending the registered agent and/or registered offic	ee address in Florida, enter the name of the	
D. If amending the registered agent and/or registered office a new registered agent and/or the new registered office a	ee address in Florida, enter the name of the	
D. If amending the registered agent and/or registered offic	ee address in Florida, enter the name of the	
D. If amending the registered agent and/or registered office new registered agent and/or the new registered office a N/A  Name of New Registered Agent	e address in Florida, enter the name of the ddress:	
D. If amending the registered agent and/or registered office and/or the new registered office and/o	ee address in Florida, enter the name of the	
D. If amending the registered agent and/or registered office new registered agent and/or the new registered office a N/A  Name of New Registered Agent	e address in Florida, enter the name of the ddress:	

Check if applicable

■ The amendment(s) is/are being filed pursuant to s. 607.0120 (11) (e), F.S.

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	V	ANABEL VILLAVICENCIO	18255 NW 68TH AVE APT 414
x Add			HIALEAH FL 33015
Remove			
2) Change		N/A	
Add			
Remove 3) Change		N/A	
Add			
Remove			
4) Change		N/A	<del></del>
Add			
Remove			
5) Change		N/A	
Add			
Remove			
6) Change		N/A	
Add			
Remove			

ha comer-	tional sheets, if necessary). (Be specific)	
ne compar	urpouse has been set for delivery as of 06/29/2020.	
<u> </u>		
		•
		_
lf an am	dment provides for an exchange, reclassification, or cancellation of issued shares,	
<u>provisi</u>	for implementing the amendment if not contained in the amendment itself: applicable, indicate N/A)	
/A	appricative, materiae (VA)	
	<del></del>	

.

06/29/2020	
The date of each amendment(s) adoption:	, if other than t
late this document was signed.	
06/29/2020	
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 locument's effective date on the Department of State's records.	will not be listed as t
adoption of Amendment(s) (CHECK ONE)	
The amendment(s) was/were adopted by the incorporators, or board of directors without shareholder action action was not required.	and shareholder
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)	
06/29/2020 Dated 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)	
DIOSVANY JIMENEZ	
(Typed or printed name of person signing)	<del></del>
P	
(Title of person signing)	