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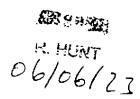
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## **COVER LETTER**

**TO:** Amendment Section Division of Corporations

Tallahassee, FL 32314

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DOCUMENT NUM	RATION: Aldung BER: PIROSOOFO	8 <del>97</del>	Inc.	<del></del>		
The enclosed Articles	of Amendment and fee are su	bmitted for filing.				
Please return all corre	spondence concerning this ma	tter to the following:				
	LUIS E.	A Cana Name of Contact Person				
	_	T. Services  Firm/ Company				
	215 E Broad	S+				
		Address 221.0.1				
	tampa FI	33604 City/ State and Zip Cod	ş*	<del></del>	- 3 - 3 - 3	
		•				: :
	E-mail address: (to be us	sed for future annual report	notification)	SEE.	5 PH	
For further informatio	n concerning this matter, pleas	se call:		STATE	PH 9: 17	•
LUIS Aldar	of Contact Person	C((1-6)) at ( <u>\$13</u> Area Co	_) <u>810 43 70</u> de & Daytime Telephone	Number	_	
Enclosed is a check fo	r the following amount made	payable to the Florida Dep	artment of State:			
S35 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)			
Amo Divi	ling Address endment Section ision of Corporations Box 6327	Ameno Divisio	Address Iment Section on of Corporations entre of Tallahassee			

Tallahassee, FL 32303

2415 N. Monroe Street, Suite 810

## Articles of Amendment to Articles of Incorporation of

	·
(Name of Corporation as curr	ently filed with the Florida Dept. of State)
(Document Numb	per of Corporation (if known)
Pursuant to the provisions of section 607.1006, Florida Statutes, its Articles of Incorporation:	this Florida Profit Corporation adopts the following amendment(s) to
A. If amending name, enter the new name of the corporation	•
A. If antending hame, ener the new hame of the corporation	<u></u>
	The new
name must be distinguishable and contain the word "corporation "Inc.," or Co.," or the designation "Coxp," "Inc," or "Co "chartered." "professional association," or the abbreviation "F	". A professional corporation name must contain the word
B. Enter new principal office address, if applicable: (Principal office address MUST BE A STREET XDDRESS)	
	~_3
C. Enter new mailing address, if applicable:	
(Mailing address MAY BE A POST OFFICE BOX)	1
`	
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 add	
Name of New Registered Agent	
Name of New Registered Agent	
(rtoru	la street address)
New Registered Office Address:	. Florida
	(City) (Zip Code)
None Designation of America Company of the print Designation of the	
New Registered Agent's Signature, if changing Registered As I hereby accept the appointment as registered agent. I am family	
Signature of Ne	w Registered Agent, if changing
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.

Example: XChange	<u>PT </u>	John Doe	
X Remove	<u>V</u> <u>I</u>	Mike Jones	
X Add	<u>sv</u>	Sally Smith	
Type of Action (Check One)	Title	<u>Name</u>	Address
1) Change	<u></u>	Maria Perdomo	215 E Broad St
_ <b>_X</b> Add			Tampa F1 3360L
Remove			
2) Change			
Add			
Remove 3) Change			
Add			
Remove			SSCH PA III
4) Change			<u> </u>
Add			
Remove			
5) Change			
Add			
Remove			
6) Change			<del></del>
Add			
Remove			

if amending or adding additional Artic (Attach additional sheets, if necessary).	(Be specific)			
•				
		<del></del> -		
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		E A	9: 17	
If an amendment provides for an excha	ange, reclassification, or cancellation of issued shares,	• •		
(if not applicable, indicate N/A)	idment if not contained in the amendment itself:			
(i) ma uppricuose, material (viii)				
· · · · ·				
	<del></del>			

date this document was signed.	
Effective date if applicable:	) days after amendment file date)
(no more mun 20	rudys after amenamem fire date)
<b>Note:</b> If the date inserted in this block does not meet the applied document's effective date on the Department of State's records.	able statutory filing requirements, this date will not be listed as t
Adoption of Amendment(s) (CHECK ONE)	
The amendment(s) was/were adopted by the incorporators, or b action was not required.	poard of directors without shareholder action and shareholder
☐ The amendment(s) was/were adopted by the shareholders. The by the shareholders was/were sufficient for approval.	number of votes cast for the amendment(s)
☐ The amendment(s) was/were approved by the shareholders thro must be separately provided for each voting group entitled to v	
"The number of votes cast for the amendment(s) was/wer	
by deis E Alderna (voting group)	aresident).
(voting group)	, in the second
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Dated UNU 2-2023	—— نام ت
Signature Mus ( Cur )	lda
	er – if directors or officers have not been e hands of a receiver, trustee, or other court
appointed fiduciary by that fiduciary)	
duis F	Alduna
(Typed or printed r	name of person signing)
Pocsiebai	าเ