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## COVER LETTER

TO: Amendment Section
Division of Corporations

NAME OF CORPORATION:	. INCORPO	RATED		
DOCUMENT NUMBER: P1200008:	3253			
The enclosed Articles of Amendment as	nd fee are sub	omitted for filing.	•	
Please return all correspondence concert	ning uns mai	ter to the following.		
MARIA E RUIZ				
		Name of Contact Person	1	
L M ACCOUNT	ING SERVI	CES INC		
		Firm/ Company		
7750 SW 117TI	H AVE SUIT	ΓΕ 201D		
		Address		
MIAMI FLORID	A 33183			
		City/ State and Zip Code	e	
MARIAQUIROS9@H	IOTMAIL.C	OM .		
E-mail addre	ess: (to be us	ed for future annual report	notification)	
For further information concerning this	matter, pleas	e call:		
MARIA E RUIZ		305 at (	595-2407	
Name of Contact Person		Area Co	de & Daytime Telephone Number	
Enclosed is a check for the following an	nount made p	payable to the Florida Depa	artment of State:	
\$35 Filing Fee		□\$43.75 Filing Fee & Certified Copy (Additional copy is enclosed)	☐\$52.50 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		Street Address Amendment Section Division of Corporations Clifton Building 2661 Executive Center Circle		

Tallahassee, FL 32301

## Articles of Amendment to Articles of Incorporation of

Or and Comment and Classical Devices Comment			
(Name of Corporation as currently filed with the Florida Dept. of State)	l		
P12000083253			
(Document Number of Corporation (if known)			
Pursuant to the provisions of section 607.1006, Florida Statutes, this <i>Florida Profit Corporation</i> adopts the fits Articles of Incorporation:	allowing	amendr	nent(s) to
A. If amending name, enter the new name of the corporation:			
		The no	ran.
name must be distinguishable and contain the word "corporation," "company," or "incorporated" or "Corp.," "Inc.," or Co.," or the designation "Corp." "Inc." or "Co" - A projessional corporation name word "chartered," "professional association," or the abbreviation "P.A."	the ab must c	breviati ontain t	on he
B. Enter new principal office address, if applicable:			-
(Principal office address <u>MUST BE A STREET ADDRESS</u> )			
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)  D. If amending the registered agent and/or registered office address in Florida, enter the name of the	ALLANKSSIE FLONDA	19 SEP 30 PM B 10	FILED
new registered agent and/or the new registered office address:	,		
Name of New Registered Agent			
(Florida street address)			
New Registered Office Address:			_
(City)	(Zip C	lode)	
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 po	sition.		

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: X Change	<u>PT</u>	John D	<u>oc</u>	
X Remove	<u>V</u>	Mike_Je	o <u>nes</u>	
X Add	<u>sv</u>	Sally S	<u>mith</u>	
Type of Action (Check One)	<u>Title</u>		<u>Name</u>	<u>Addres</u> s
1) Change	VP		DAVID GOMEZ	8 NW 109 PLACE
X Add				MIAMI FLORIDA 33172
Remove				
2) Change				
Add				
Remove				
3 ) Change				
Add				
Remove				
4) Change				
Add				
Remove				
5) Change		_		
Add				
Remove				
6) Change				
Add				
Remove				

f 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)	
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	09/27/2019	, if other than the
The date of each amendment(s) date this document was signed.		
	0/08/2019	
Effective date <u>if applicable</u> :	(no more than 90 days after amendment file date)	
Note: If the date inserted in this document's effective date on the	s block does not meet the applicable statutory filing requirements, the Department of State's records.	his date will not be listed as the
Adoption of Amendment(s)	(CHECK ONE)	
The amendment(s) was/were a by the shareholders was/were	dopted by the shareholders. The number of votes cast for the amenda sufficient for approval.	ment(s)
☐ The amendment(s) was/were a must be separately provided j	approved by the shareholders through voting groups. The following started for each voting group entitled to vote separately on the amendment(s)	tatement ):
	ast for the amendment(s) was/were sufficient for approval	
by	(voting group)	
- J	(voting group)	
☐ The amendment(s) was/were a action was not required.	adopted by the board of directors without shareholder action and share	eholder
The amendment(s) was/were action was not required.	adopted by the incorporators without shareholder action and sharehold	der
09/27/2	019	
Dated		
Signature	Mula Dia	
(By sele	a director president or other officer – if directors or officers have not cted, by an incorporator – if in the hands of a receiver, trustee, or other binted fiduciary by that fiduciary)	been er court
	JULIA DIAZ	
	(Typed or printed name of person signing)	
	PRESIDENT	
	(Title of person signing)	