P13000000517

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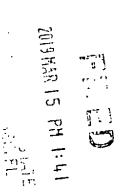
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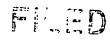
TO: Amendment Section Division of Corporations

NAME OF CORPOR	ATION: DELUXRIDE INC	ORPORATION		
DOCUMENT NUME	P13000000517			
The enclosed Articles	of Amendment and fee are su	bmitted for filing.		
Please return all corres	pondence concerning this ma	tter to the following:		
	JORGE TRIANA			
		Name of Contact Person	1	
	DELUXRIDE INC.			
		Firm/ Company		
	10412 HIDDEN LN	, ,		
		Address		
	ORLANDO, FL 32821			
		City/ State and Zip Cod		
		Only thate and hip coo	•	
triana	828@gmail.com			
	E-mail address; (to be us	sed for future annual report	notification)	
For further information	r concerning this matter, pleas	se call:		
JORGE TRIANA		407 at (668-5866	
Name of Contact Person		at (407) 668-5866 Area Code & Daytime Telephone Number		
Enclosed is a check fo	r the following amount made	payable to the Florida Depa	irtment of State:	
S35 Filing Fee	☐\$43.75 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)	
<u>Mai</u>	ling Address		Address	
	endment Section	Amendment Section Division of Corporations		
	sion of Corporations Box 6327		Building	
	ahassee, FL 32314		Executive Center Circle	

Tallahassee, FL 32301

Tallahassee, FL 32314

Articles of Amendment to Articles of Incorporation of



2019 MAR 15 PM 1:41

DELUXRIDE, INC.		ZOLYHAR I J. FII I	: 4 [
(Name o	f Corporation as curren	tly filed with the Florida Dept. of State);	TE
P13000000517		Production of the second	٠[_
,	(Document Number	of Corporation (if known)	
Pursuant to the provisions of section 607.1 its Articles of Incorporation:	1006, Florida Statutes, thi	s Florida Profit Corporation adopts the following amendmen	l(s) to
A. If amending name, enter the new na	me of the corporation:		
		The new	
name must be distinguishable and cont "Corp.," "Inc.," or Co.," or the design word "chartered," "professional associat	ation "Corp." "Inc." or	ion," "company," or "incorporated" or the abbreviation "Co". A professional corporation name must contain the "P.A."	
0.5	er It I. I	N/A	
B. Enter new principal office address, i (Principal office address <u>MUST BE A ST</u>			
C. Enter new mailing address, if applie		N/A	
(Mailing address <u>MAY BE A POST (</u>	DEFICE BOX		
D. If amending the registered agent an			
new registered agent and/or the new		<u>ss:</u>	
Name of New Registered Agent	N/A		
	tFlorida s	street address)	
	N/A	, Florida N/A	
New Registered Office Address		(City) (Zip Code)	
		·	
New Registered Agent's Signature, if cl	hanging Registered Ager	nt:	
I hereby accept the appointment as registe	ered agent. I am familia	r with and accept the obligations of the position.	
	Simulation of V	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:

 $P \sim President; V = Vice President; T = Treasurer; S = Secretary; D \Rightarrow Director; TR = Trustee; C = Chairman or Clerk; CEO = Chief Executive Officer; CFO = Chief Financial Officer. If an officer director holds more than one title, list the first letter of each office held. President, Treasurer, Director would be PTD.$

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	
<u>X</u> Add	\underline{SV}	Sally Smith	
Type of Action (Check One)	<u>Title</u>	<u>Name</u>	<u>Addres</u> s
1) Change	VP	ALVARO G SOFFIA	N/A
Add X Remove			
2) Change			N/A
Add			
Remove			
3) Change			
Add			
Remove			
4) Change			
Add			
Remove			
5) Change			
Add			
Remove			
6) Change			
Add			
Remove			

i. <u>If amend</u> Attach <i>ad</i>	<mark>ling or adding additio</mark> dditional sheets, if nec	onal Articles, enter clessary). (Be specific	hange(s) here: c)			
N/A						
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. Ifan am	endment provides fo	r an exchange, reclas	sification, or car	ncellation of issued	shares,	
provisi	ons for implementing	the amendment if no	ot contained in the	he amendment itsel	<u>lf:</u>	
υ <i>μ</i> Ν/Α	not applicable, indicat	e (V20)				
×//X	<u> </u>			 		
						
			· · · · · · · · · · · · · · · · · · ·			

The date of each amendment(s) adop	3//11/2019 tion:	, if other than the
date this document was signed.		
3/11/20	19	
Effective date <u>if applicable</u> :	(no more than 90 days after amendment file o	date)
Note: If the date inserted in this bloc document's effective date on the Depar	k does not meet the applicable statutory filing required tment of State's records.	nents, this date will not be listed as the
Adoption of Amendment(s)	(<u>CHECK ONE</u>)	
☐ The amendment(s) was/were adopte by the shareholders was/were suffice	d by the shareholders. The number of votes cast for the ient for approval.	: amendment(s)
☐ The amendment(s) was/were approx must be separately provided for each	red by the shareholders through voting groups. The follows the voting group entitled to vote separately on the amend	owing statement dment(s):
"The number of votes cast for	the amendment(s) was/were sufficient for approval	
by	(yoting group)	
,	(voting group)	
☐ The amendment(s) was/were adopte action was not required.	d by the board of directors without shareholder action a	and shareholder
■ The amendment(s) was/were adopte action was not required.	d by the incorporators without shareholder action and s	hareholder
3/11/2018 Dated Signature	AmZ	
(By a directed, by a directed, by a directed, by a directed, by a directed by a direct	etor, president or other officer – if directors or officers by by an incorporator – if in the hands of a receiver, trustee fiduciary by that fiduciary)	
Α	LVARO G SOFFIA	
_	(Typed or printed name of person signing)	
V	CE PRESIDENT	
	(Title of person signing)	