P13000034977

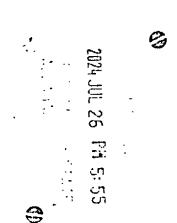
| (Re | questor's Name) | |
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| (Add | dress) | |
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| | WAIT | MAIL |
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| Certified Copies | Certificates | of Status |
| Special Instructions to F | Filing Officer: | |
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Office Use Only



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COVER LETTER

TO: Amendment Section Division of Corporations

| NAME OF CORPOR | ATION: PIRATINO, CORE | PORATION | <u></u> | · · · · · · · · · · · · · · · · · · · |
|--------------------------|--|--|---------------------------------------|---|
| DOCUMENT NUME | | | | |
| | of Amendment and fee are su | bmitted for filir | ıg. | |
| Please return all corres | pondence concerning this ma | tter to the follow | wing: | |
| | Massimiliano Stamerra | | | |
| • | | Name of Co | ntact Persor | 1 |
| | Piratino, Corporation | | | |
| | | Firm/ C | ompany | |
| | 1830 Radius Dr. Apt207 | | | |
| | | Add | ress | _ |
| | Hollywood, FL - 33020 | | | |
| | | City/ State a | nd Zip Code | e |
| | maxstamerra@gmail.com | | | |
| | E-mail address: (to be us | sed for future ar | inual report | notification) |
| | | | | |
| For further information | i concerning this matter, pleas | se call: | | |
| Massimiliano Stamerr | a | at (| 754 | 209-4209 |
| Name o | of Contact Person | | Area Co | de & Daytime Telephone Number |
| Enclosed is a check for | the following amount made | payable to the F | lorida Depa | artment of State: |
| \$35 Filing Fee | □\$43.75 Filing Fee & Certificate of Status | S43.75 File Certified C (Additional enclosed) | ору | □\$52.50 Filing Fee Certificate of Status Certified Copy (Additional Copy is enclosed) |
| Ame Divi P.O. | ling Address endment Section sion of Corporations Box 6327 chassee, FL 32314 | | Amend Division The Co 2415 N | Address Iment Section on of Corporations entre of Tallahassee N. Monroe Street, Suite 810 assee, FL 32303 |

Articles of Amendment to Articles of Incorporation of

PIRATINO, CORPORATION

| PIRATINO, CORPORATION | |
|--|---|
| (Name of Corporation as currently | filed with the Florida Dept. of State) |
| P13000034977 | |
| (Document Number of | Corporation (if known) |
| Pursuant to the provisions of section 607.1006, Florida Statutes, this F its Articles of Incorporation: | Ilorida Profit Corporation adopts the following amendment(s) to |
| A. If amending name, enter the new name of the corporation: | |
| | The new |
| name must be distinguishable and contain the word "corporation," "co "Inc.," or Co.," or the designation "Corp," "Inc," or "Co". A "chartered," "professional association," or the abbreviation "P.A." | ompany," or "incorporated" or the abbreviation "Corp.," professional corporation name must contain the word |
| 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 OFFICE BOX) | 2021 |
| | · <u></u> |
| | 26 |
| D. If amending the registered agent and/or registered office addre | ess in Florida, enter the name of the |
| new registered agent and/or the new registered office address: | <u>်</u> ပျှ |
| Name of New Registered Agent | ្នំ ហ :: ហ |
| , tem styries styries and the styries are styries and the styries are styries and the styries and the styries are styries are styries and the styries are styries and the styries are styries are styries and the styries are styries are styries and the styries are styries are styries are styries and the styries are styries are styries are styries are styr | 8 |
| (Florida stree | et address) |
| New Designation Add | |
| New Registered Office Address: | , Florida City) (Zip Code) |
| | |
| | |
| New Registered Agent's Signature, if changing Registered Agent: I hereby accept the appointment as registered agent. I am familiar wi | ith and accent the obligations of the position |
| Therety accept the appointment as registered agent. I am juminar wi | in and accept the ornigations of the position. |
| | |
| | |
| Signature of New Res | gistered Agent, if changing |
| Check if applicable | |
| ☐ The amendment(s) is/are being filed pursuant to s. 607.0120 (11) (e | 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:

| X Change | <u>PT</u> | John Doe | |
|----------------------------|--------------|------------------------|---------------------|
| X Remove | Y | 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 | Мг. | STAMERRA, MASSIMILIANO | 1830 RADIUS DR |
| Add | | | APT 207 |
| X Remove | | | HOLLYWOOD, FL 33020 |
| 2) Change | | <u> </u> | |
| Add | | | |
| Remove 3) Change | | | |
| Add | | | |
| Remove | | | |
| 4) Change | | | |
| Add | | | |
| Remove | | | |
| 5) Change | | | |
| Add | | | |
| Remove | | | |
| 6) Change | | | |
| Add | | | |
| Remove | | | |

| If amending or adding additional Article (Attach additional sheets, if necessary). | (Be specific) |
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| If an amendment provides for an exch | hange, reclassification, or cancellation of issued shares, |
| provisions for implementing the ame (if not applicable, indicate N/A) | endment if not contained in the amendment itself: |
| | |
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| The date of each amendment(s) ad date this document was signed. | option: | , if other than the |
|--|---|---------------------------------------|
| Effective date if applicable: | | |
| Enterviewe date in applicable. | (no more than 90 days after amendment file date) | · · · · · · · · · · · · · · · · · · · |
| Note: If the date inserted in this bl document's effective date on the De | ock does not meet the applicable statutory filing requirements, partment of State's records. | this date will not be listed as the |
| Adoption of Amendment(s) | (CHECK ONE) | |
| The amendment(s) was/were ado action was not required. | pted by the incorporators, or board of directors without sharehold | ler action and shareholder |
| ☐ The amendment(s) was/were ado by the shareholders was/were su | pted by the shareholders. The number of votes cast for the amendation for approval. | dment(s) |
| | roved by the shareholders through voting groups. The following 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) | |
| 05/13/202 4 Dated | | |
| selected | rector, president or other officer – if directors or officers have no l, by an incorporator – if in the hands of a receiver, trustee, or othed fiduciary by that fiduciary) | |
| | Massimiliano Stamerra | |
| | (Typed or printed name of person signing) Manager (Title of person signing) | |