P13000077339

(Requ	uestor's Name)	
(Addr	ress)	
(Addr	ess)	
(City/	State/Zip/Phone	
PICK-UP	☐ WAIT	MAIL
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TO: Amendment Section Division of Corporations

NAME OF CORPOR	RATION: Chaquita	/enture Corp		
DOCUMENT NUME	BER: P13000077339			
The enclosed Articles	of Amendment and fee are su	bmitted for filing.		
Please return all corres	spondence concerning this ma	tter to the following:		
	Sofia Powell-Cosio			
		Name of Contact Persor	1	
	Sofia Powell-Cosio P.A.			
		Firm/ Company	 ει	
	1200 Brickell Avenue, Suite	520		
		Address		
	Miami, Florida 33131			
		City/ State and Zip Code	2	
	spcmgmtservices@gmail.com	n		
		sed for future annual report	notification)	
For further information	n concerning this matter, plea-	se call:		
Sofia powell-	Cosio	at (_305	57909988	
Name of Contact Person		Area Code & Daytime Telephone Number		
Enclosed is a check fo	r the following amount made	payable to the Florida Depa	artment of State:	
□k \$35 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)	
Mailing Address Amendment Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314		Street Address Amendment Section Division of Corporations The Centre of Tallahassee 2415 N. Monroe Street, Suite 810		

Tallahassee, Fl. 32303

Articles of Amendment to Articles of Incorporation of

P13000077339	of Carparation as aurrently	filed with the Florida Dept. of State)	
P13DDH1//339	or Corporation as currently	med with the Florida Dept. of State)	
13000077339	(Document Number of	Cornoration (if known)	
Pursuant to the provisions of section 607. its Articles of Incorporation:	,	Corporation (it known) Corporation adopts the following amendment(s) to	
A. If amending name, enter the new na	ame of the corporation:		
		The new	
	Corp," "Inc," or "Co". A	ompany," or "incorporated" or the abbreviation "Corp.," professional corporation name must contain the word	
B. Enter new principal office address, if applicable:		1200 Brickell AVenue, Suite 520	
(Principal office address <u>MUST BE A S</u>		Miami, Florida 33131	
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)		1200 Brickell AVenue, Suite 520	
		Miami, Florida 33131	
D. If amending the registered agent an		ess in Florida, enter the name of the	
new registered agent and/or the nev	v registered office address:		
Name of New Registered Agent SPC MAnagement Services		Inc	
	1200 BRickell AVenue, Suit	te 520	
	(Florida stree	et address)	
New Registered Office Address:	(Florida stree	et address) , Florida 33131	

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: X Change	<u>PT</u>	John De	o <u>c</u>	
X Remove	<u>v</u>	Mike Jo	<u>ones</u>	
X Add	<u>sv</u>	Sally Si	mith_	
Type of Action (Check One)	Title		Name	<u>Addres</u> s
1) Change		_		
Add				-
Remove				
2) Change		_		
Add				
Remove 3) Change				
Add				
Remove				
4) Change				
Add				
Remove				
5) Change				
Add				
Remove				
の Change				
Add			·	
Remove				

	adding additional Art all sheets, if necessary).		- 			
						
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provisions for	nt provides for an exc implementing the am licable, indicate N/A)	hange, reclassifice endment if not co	cation, or cancella ontained in the ar	ation of issued sho nendment itself:	ares,	
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The date of each amendment(s) adoption:date this document was signed.	November 19, 2020	, if other than the
, and the second	November 19, 2020 (no more than 90 days after amendment file date,)
Note: If the date inserted in this block does not document's effective date on the Department of S		ts, this date will not be listed as the
Adoption of Amendment(s) (CHE	CK ONE)	
The amendment(s) was/were adopted by the ir action was not required.	acorporators, or board of directors without shareh	older action and shareholder
☐ The amendment(s) was/were adopted by the sl by the shareholders was/were sufficient for ap		endment(s)
☐ The amendment(s) was/were approved by the must be separately provided for each voting g	shareholders through voting groups. The following roup entitled to vote separately on the amendment	
"The number of votes cast for the amend	Iment(s) was/were sufficient for approval	
by		
(votin	ng group)	
Dated November 19 Signature (By a director, president)	, 2020 ent-or other officer – if directors or officers have	not been
	porator - if in the hands of a receiver, trustee, or	
Alvaro Quija		
T)	yped or printed name of person signing)	
President		
<u></u>	itle of person signing)	