## P13000100107

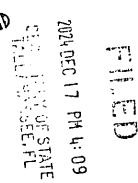
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## **COVER LETTER**

TO: Amendment Section Division of Corporations

NAME OF CORPO	RATION: CORREDOR HOL	DINGS CORP		_	
	BER: P13000100107			_	
The enclosed Articles	s of Amendment and fee are su	bmitted for filing.			
Please return all corre	espondence concerning this ma	tter to the following:			
	DANIELA MADRAZO DE I	LA PARRA			
		Name of Contact Person	1		
	C/O DRAGE CPA, PLLC				
		Firm/ Company			
	1550 MADRUGA AVENUE				
		Address			
	CORAL GABLES, FL 33140				
		City/ State and Zip Cod	е		
	danielamadrazo.p@gmail.cor	n			
	E-mail address: (to be us	sed for future annual report	notification)	_	
For further information	on concerning this matter, plea la Parra	se call:at ( 305	_) 504-8861		
Name	of Contact Person		de & Daytime Telephone N		
Enclosed is a check f	or the following amount made	payable to the Florida Dep	artment of State:	0) × 5	
■ \$35 Filing Fec	□\$43.75 Filing Fee & Certificate of Status	S43.75 Filing Fee & Certified Copy (Additional copy is enclosed)	□\$52.50 Filing Fee Certificate of Status Certified Copy (Additional Copy is enclosed)	2024 DEC 17 PM 4	Table
Mailing Address			Address	4: 09 STATE	
Amendment Section Division of Corporations		Amendment Section Division of Corporations		بي م	
P.O. Box 6327		The Centre of Tallahassee			
Tallahassee, FL 32314		2415 N. Monroe Street, Suite 810			
		Tallah	assee. FL 32303		

## Articles of Amendment to Articles of Incorporation of

CORREDOR HOLDINGS CORP

CORREDOR HOEDINGS CORT			
(Name of Corporation as current	tly filed with the Florida Dept. of State)		
P13000100107			
(Document Number	of Corporation (if known)		
Pursuant to the provisions of section 607.1006, Florida Statutes, this its Articles of Incorporation:	Florida 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," 'The.," or Co.," or the designation "Corp," "Inc," or "Co", "chartered," "professional association," or the abbreviation "P.A.	A professional corporation name must contain the word		
B. Enter new principal office address, if applicable:	DRAGE CPA. PLLC		
(Principal office address MUST BE A STREET ADDRESS)	1550 MADRUGA AVENUE, STE 150		
	CORAL GABLES, FL 33146		
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BON)	DRAGE CPA, PLLC		
	1550 MADRUGA AVENUE, STE 150		
	CORAL GABLES, FL 33146		
D. If amending the registered agent and/or registered office address new registered agent and/or the new registered office address Name of New Registered Agent			
(Elavida v	treet address)		
(Fibrial S	The continues of the co		
New Registered Office Address:	(City) , Florida		
	(Coll)		
New Registered Agent's Signature, if changing Registered Agen I hereby accept the appointment as registered agent. I am familiar			
I hereby accept the appointment as registered agent. I am familiar	with and accept the obligations of the position. STATE		
Circumstance of Vanc	Registered Agent, if changing		
Signature of New .	negalerea Agem, y enanging		
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)

Example:

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.

X Change	<u> PT</u>	John Doe	
X Remove	<u>V</u>	Mike Jones	
X Add	<u>sv</u>	Sally Smith	
Type of Action (Check One)	<u>Title</u>	<u>Name</u>	Address
1) Change	P/CEO	EDGARDO OBREGON	1000 BRICKELL AVE
Add			STE 715 PMB 5277
X Remove			MIAMI, FL 33131
2) Change	P 	Daniela Madrazo de la Parra	
X Add			
Remove 3) Change			
Add			
Remove			<u> </u>
4) Change			2021 DEG
Add			
Remove			7
5) Change			C 17 PM 4:
Add			<del></del>
Remove			——————————————————————————————————————
6)Change		<del>-</del>	<del></del>
Add			
Remove			

Attach additional sheets, if necessary). (Be specific)	
·	
<u> </u>	
	<del></del>
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:	L
(if not applicable, indicate N/A)	E CD
	S S S S S S S S S S S S S S S S S S S
	EC.
1 Min 2	
	SEE S
<del></del>	PH II: 09
	: 09 FF
	[1]

The date of each amendment(s) a date this document was signed.	doption:	, if other than the
Effective date if applicable:		
r trective date in appricable.	(no more than 90 days after amendment file date)	
Note: If the date inserted in this document's effective date on the E	block does not meet the applicable statutory filing requirements, thi epartment of State's records.	s date will not be listed as the
Adoption of Amendment(s)	( <u>CHECK ONE</u> )	
■ The amendment(s) was/were ac action was not required.	opted by the incorporators, or board of directors without shareholder	action and shareholder
☐ The amendment(s) was/were ac by the shareholders was/were s	opted by the shareholders. The number of votes cast for the amendmufficient for approval.	ient(s)
	proved by the shareholders through voting groups. The following start each voting group entitled to vote separately on the amendment(s):	itement
"The number of votes cas	t for the amendment(s) was/were sufficient for approval	
by		
	(voting group)	
12/13/2	024	
Dated		
Signature $\int_{-\infty}^{\infty}$	gned by:	
select	hterest/president or other officer – if directors or officers have not bed, by an incorporator – if in the hands of a receiver, trustee, or other ited fiduciary by that fiduciary)	
	Daniela Madrazo de la Parra	DEC DEC
	(Typed or printed name of person signing)	
	President	PA PA
	(Title of person signing)	PH 1: 09