Division of Corporations Electronic Filing Cover Sheet

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COR AMND/RESTATE/CORRECT OR O/D RESIGN ACKLINS REAL ESTATE INVESTMENTS INC.

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Electronic Filing Menu Corporate Filing Menu



Articles of Amendment to Articles of Incorporation of

	on as currently filed with the Florida Dept. of State)	
P14000013678	THE PARTY OF STREET PARTY OF STREET	
(Docum	nem Number of Corporation (If known)	
Pursuant to the provisions of section 667,1006, Florida is Articles of incorporation:	Statutes, this Florida Profit Corporation adopts the following a	mendment(s) t
If amending name, enter the new name of the cor	rporation;	
ame must be distinguishable and contain the word "cor- line.," or Co.," or the designation "Corp," "inc." characed." "professional association," or the abbrevi	rporation," "company," or "incorporated" or the abbreviation or "Co". A professional corporation name must contain distinct "P.A."	he new Corp. "Corp."
Enter new principal office address, if applicable:	`.	20
Principal office address MUST BE A STREET ADDR	RESS)	70
		<u> </u>
		<u></u>
Enter new mailing address, if applicable: (Mailing address MAY BEA POST OFFICE BOX)		71 -
If amount in a three thr		
If amending the registered agent and/or registered new registered agent and/or the new registered of	d office address in Florida, enter the name of the	
A STATE OF THE HEAT TO STATE OF THE STATE OF	d office address in Florida, enter the name of the fice address:	
If amending the registered agent and/or registered new registered agent and/or the new registered off liams of New Registered Agent	d office address in Florida, enter the name of the Nee address:	
A STATE OF THE HEAT TO STATE OF THE STATE OF	ikę gdiręss:	
liams of New Registered Agent	(Florido street oddrest)	
A STATE OF THE HEAT TO STATE OF THE STATE OF	(Fiorido street oddrest)	
liams of New Registered Agent	(Florida street addrest)	
New Registered Office Address:	(Florido street oddrest) (Florido street oddrest) (Clty) (Clty) (Zip Code)	
New Registered Office Address:	(Florido street oddrest) (Florido street oddrest) , Florida (City) (Zip Code)	
New Registered Office Address:	(Florido street oddrest) (Florido street oddrest) (Clty) (Clty) (Zip Code)	
liams of New Registered Agent New Registered Office Address: W Registered Office Address: W Registered Agent's Signature, if changing Registerely accept the appointment as registered agent. I am	(Florida street oddrest) (Florida street oddrest) (City) (Zip Code) ered Agent: in familiar with and accept the obligations of the position.	
liams of New Registered Agent New Registered Office Address: W Registered Office Address: W Registered Agent's Signature, if changing Registerely accept the appointment as registered agent. I am	(Florido street oddrest) (Florido street oddrest) (Clty) (Clty) (Zip Code)	

If amonding 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 latter of the office title:

P = President; V = Vice President; T = Trecauter; S = Secretary; D = Director; TR = Trustae; C = Chairman or Clerk; CEO = Chief Executive Officer; CFO = Chief Financial Officer. If an afficar/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, Idike Jones, V as Remove, and Sally Smith, SV as an Add.

Example: X.Change	PT	John Doe		
∑ Remove	Y	Mike Jones		
_X Add	<u>şv</u>	Sally Smith		
Type of Action (Check One)	Title	Name	<u>Addres</u> s	
1) Change	VPT	GIANCARLO CODONI	3370 MARY STREET	
Add			MIAMI, FL 33133	_
X Remove				_
2)Change	VPS	NICOLA TRAMEZZANI	3370 MARY STREET	
Add			MIAMI, FL 33133	_
X Remove	PVST	GIOVANNI FASCIANO	3370 MARY STREET MIAMI, FL 33133	2024 OC
Add			in .	
Remove			7	7.7
4) Change			(A)	- E
Add			<u> </u>	
Remove				
5) Change				_
Add				_
Remove	•			-
6) Change				
Add				_
Remove				_

2024 OCT 29 AH 10: 07

f amending of adding additional Ar Attach additional sheets, if necessary).	. (Be specific)	
		·····
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		<u> </u>
		<u> </u>
		Ξ,
an amendment provides for an excl	tange replanding the cancellation of immed	charas
rovisions for implementing the nme (If not applicable, Indicate N/A)	nange, reclassification, or cancellation of insued indiment If not contained in the amendment itse	IG.
(vict approved, named to their		

The date of each amendment(s) adoption:	if other than th
date this document was signed.		
Effective date if applicable:		
	(no more than 90 days after amendment file data)	
Note: If the date inserted in the decument's effective date on the	is block does not meet the applicable statutory filing requirements, this date will be Department of State's records.	ii not be listed as th
Adoption of Amendment(s)	(CHECK ONE)	
☐ The amendment(s) was/were action was not required.	adopted by the incorporators, or board of directors without shareholder action and	f shareholder
The amendment(s) was/were by the shareholders was/wer	adopted by the shareholders. The number of votes east for the amendment(s) e sufficient for approval.	
The amendment(s) was/were must be separately provided	approved by the shareholders through voting groups. The following statement for each voting group entitled to vote separately on the amondment(s):	21
"The number of votes of	ast for the amendment(s) was/were sufficient for approval	2024 OCT 29
by	(voting group)	- 1
•	(voling group)	29
OCTOB	ER <u>914-702</u> 4	7.7
Dated	- 11/19	
Signature	- Munico	
(Ву	a director, president or other officer their octors or officers have not been	
selec appo	sted, by an incorporator — If in the hands of a receiver, trustee, or other court inted fiductary by that fiduciary)	
	GIOVANNI FASCIANO	
	(Typed or printed name of person signing)	
	PRESIDENT	
	(Title of person eignine)	