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NOV 1 2021 S. PRATHEF

COVER LETTER

TO: Amendment Section Division of Corporations

NAME OF CORPO	ORATION: GIUMARC CORP	· · · · · · · · · · · · · · · · · · ·	
DOCUMENT NUM	P14000031718		
The enclosed Article	es of Amendment and fee are su	bmitted for filing.	
Please return all cor	respondence concerning this ma	tter to the following:	
	CRISTIAN M. CIARLIERO		
		Name of Contact Person	1
	GIUMARC CORP		
	****	Firm/ Company	
	2200 NE 123 ST		
		Address	
	NORTH MIAMI, FL. 33181		
	· · · · · · · · · · · · · · · · · · ·	City/ State and Zip Code	e e
	ARIEL@0054REALTY.CO	M	
	•	sed for future annual report	notification)
For further informat	ion concerning this matter, pleas	786	8043205
Name of Contact Person		at (Area Co	de & Daytime Telephone Number
	for the following amount made		
S35 Filing Fee	□\$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)
Mailing Address		Street	Address
Amendment Section			Iment Section
	vision of Corporations		on of Corporations
	O. Box 6327		entre of Tallahassee

Tallahassee, FL 32303

	Articles of A to Articles of In O	o ocorporation	2021 OCT SELNE D	-11		
GIUMARC CORP			20 AKY	=		
(<u>Name</u>	of Corporation as current	tly filed with the Florida Dept. of State)	PH PF	0		
P14000031718			15 18			
	(Document Number of	of Corporation (if known)	RIE RIE			
Pursuant to the provisions of section 607 its Articles of Incorporation:	.1006, Florida Statutes, this	s Florida Profit Corporation adopts the fol	lowing amendment	t(s) to		
A. If amending name, enter the new n	ame of the corporation:					
			The new			
	Corp," "Inc," or "Co".	"company," or "incorporated" or the abbro A professional corporation name must c "				
P. Enter now principal office address:	if applicables	2200 NE 123 ST				
B. Enter new principal office address, if applicable: (Principal office address MUST BE A STREET ADDRESS)		NORTH MIAMI, FL, USA, 33181				
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)		2200 NE 123 ST				
		NORTH MIAMI, FL, USA, 33181				
D. If amending the registered agent an new registered agent and/or the ne						
	CRISTIAN M. CIARLIE					
Name of New Registered Agent	2200 NE 123 ST					
		reet address)				
New Registered Office Address:	NORTH MIAMI	Florida 33	181			
<u>wew registered Office Address.</u>		(City) (Z.				
New Registered Agent's Signature, if c	hanging Registered Agen	t·				
		 with and accept the obligations of the posi	tion.			
	Signature of New 1	Registered Agent, if changing				

Check if applicable

 \blacksquare 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.

\underline{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>	<u>Addres</u> s
1) Change	P	CRISTIAN M. CIARLIERO	2200 NE 123 ST.
$\frac{X}{X}$ Add			NORTH MIAMI, FL, USA
Remove			33181
2) Change	S	CRISTIAN M. CIARLIERO	2200 NE 123 ST,
X Add	<u></u> ,		NORTH MIAMI, FL, USA
Remove 3) Change	P	SILVINA S. GAMBARDELLI	33181 4111 S OCEAN DR, SUITE 2109 HOLLYWOOD, FL, 33019
Add Remove 4) Change Add	<u>s</u>	SILVINA S. GAMBARDELLI	4111 S OCEAN DR. SUIETE 2109 HOLLYWOOD, FL. 33019
X Remove 5) Change Add		-	
Remove 6) Change Add Remove			

Attach ad	lditional sheet	s, if necessary)	rticles, enter cl (Be specific	:)			
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fan nma	admont arou	idae for an av	ahanna raalas	cification or :	ancellation of	issued shares,	
provisio	ns for implen	nenting the an	rendment if no	it contained in	the amendme	ent itself:	
(if no	ot applicable,	indicate N/A)					
				···	_		
						-	

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	AUGUST 03/2020	
The date of each amendmen		, if other than the
date this document was signed		
Effective date if applicable:	AUGUST 03/2020	
Effective date it applicable.	(no more than 90 days after amendment file date)	
	this block does not meet the applicable statutory filing requirements, this date he Department of State's records.	will not be listed as the
Adoption of Amendment(s)	(CHECK ONE)	
The amendment(s) was/we action was not required.	re adopted by the incorporators, or board of directors without shareholder action	and shareholder
☐ The amendment(s) was/web by the shareholders was/web.	re adopted by the shareholders. The number of votes cast for the amendment(s) ere sufficient for approval.	
	re approved by the shareholders through voting groups. The following statement of for 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	202 TÄLL
by	(voting group)	FILED 2021 OCT 20 PM 6: 0 SECRETAKY OF STATE ALLAHASSEE, FLORID
		AS AS
AUG	JST 03/2020 /) /)	FILED T 20 PI TAKY OF ASSEE. I
	// //	
	// ///	
Signature	- July 1	ORI ORI
(B	y a director, president or other officer – if directors or officers have not been lected, by an incorporator – if in the hands of a receiver, trustee, or other court pointed fiduciary by that fiduciary)	PH 6: 01 F STATE FLORIDA
	CRISTIAN M. CIARLIERO	
	(Typed or printed name of person signing)	
	PRESIDENT/SECRETARY	
	(Title of person signing)	