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COVER LETTER

TO: Amendment Section Division of Corporations

NAME OF CORPO	ORATION: FRAMING WHOL	LESALE GUATEMALA II	NTERNATIONAL INC		
DOCUMENT NUM	IBER: P14000063268				
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:			
	JUAN DELGADO SILVEST	RE			
	·	Name of Contact Person	n		
	FRAMING WHOLESALE GUATEMALA INTERANTIONAL INC				
	Firm/ Company				
	316 KENNEDY ST				
		Address			
	JUPITER, FL 33458				
		City/ State and Zip Cod	e		
	JUANDEL1982@ICLOUD.COM				
	E-mail address: (to be us	sed for future annual report	notification)		
For further informat	ion concerning this matter, pleas	se call;			
JUAN DELGADO	SILVESTRE	561			
Name of Contact Person		Area Co	de & Daytime Telephone Number		
Enclosed is a check	for the following amount made	payable to the Florida Dep	artment of State:		
S35 Filing Fee	□\$43.75 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)		
. — ——————————————————————————————————	miling Address mendment Section division of Corporations O. Box 6327 dilahassee, FL 32314	Amend Division The C 2415 I	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

FRAMING WHOLESALE GUATEMALA INTERNATIONAL INC

(Name of Corporation as current	tly filed with the Florida Dept, of State)	
214000063268		
(Document Number of	of Corporation (if known)	
Pursuant to the provisions of section 607.1006, Florida Statutes, this is Articles of Incorporation:	s Florida Profit Corporation adopts the follo	wing amendment(s)
A. If amending name, enter the new name of the corporation:		
ame must be distinguishable and contain the word "corporation," "		The new
Inc.," or Co.," or the designation "Corp," "Inc," or "Co", chartered," "professional association," or the abbreviation "P.A.	A professional corporation name were	ation "Corp.," ntain the word
Enter new principal office address, if applicable:	N/A	
Principal office address MUST BE A STREET ADDRESS)		_
Enter new mailing address, if applicable:		
(Mailing address MAY BE A POST OFFICE BOX)		
		-
		23
. If amending the registered agent and/or registered agent		HUE Y
. If amending the registered agent and/or registered office add new registered agent and/or the new registered office address	ress in Florida, enter the name of the	बड़ । १३ :
Name of New Registered Agent N/A	_	<u></u> د
Nume of New Registered Agent		·
		ن :- :
(Florida str	rect address)	_
New Registered Office Address:	, Florida	
	- -	p Code)
ew Registered Agent's Signature, if changing Registered Agent:	<u>:</u>	
	with and accept the obligations of the position	1.
nereby accept the appointment as registered agent. I am familiar v	and accept the orangunous of the position	
	and accept the soughtons of the position	
i am jaminar v	and accept the sengulous of the position	
		_
	egistered Agent, if changing	

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 PT John Doe X Remove <u>V</u> Mike Jones _X Add <u>SV</u> Sally Smith Type of Action Title <u>Name</u> <u>Address</u> (Check One) VΡ ANTONIA C. CARDONA HERNAN 316 KENNEDY ST 1) ____ Change Χ JUPITER, FL 33458 _ Add Remove MARIA C. DELGADO CARDONA 316 KENNEDY ST 2) ____ Change JUPITER, FL 33458 _ Add _ Remove 3) ____ Change Add _ Remove 4) ____ Change ___ Add __ Remove 5) ____ Change ___ Add Remove 6) ____ Change ____ Add ____ Remove

(Attach addition	adding additional Air al sheets, if necessary)	(Be specific)			
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If an amendme	nt provides for an exc	<u>change, reclassificati</u>	on, or cancellation o	of issued shares,	
Cit not ann	implementing the am licable, indicate N/4)	iendment if not cont:	ained <u>in the amendr</u>	nent itself:	
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	06/13/2023	
The date of each amendment(s) date this document was signed.	adoption:	, if other than the
•	5/13/2023	
	(no more than 90 days after amendmen	file date)
Note: If the date inserted in this document's effective date on the	s block does not meet the applicable statutory filing re Department of State's records.	quirements, this date will not be listed as the
Adoption of Amendment(s)	(CHECK ONE)	
The amendment(s) was/were a action was not required.	idopted by the incorporators, or board of directors without	ut shareholder action and shareholder
☐ The amendment(s) was/were a by the shareholders was/were	idopted by the shareholders. The number of votes cast is sufficient for approval.	or the amendment(s)
	approved by the shareholders through voting groups. The correction of the correction	
"The number of votes ca	ist for the amendment(s) was/were sufficient for approve	a!
by	(voting group)	 -:
	(voting group)	
06/13/20	23	
Dated Signature	un Dolado Datre	
Selec	director, president or other officer – if directors or officered, by an incorporator – if in the hands of a receiver, trinted fiduciary by that fiduciary)	
	JUAN DELGADO SILVESTRE	
	(Typed or printed name of person signing)
	PRESIDENT	
	(Title of person signing)	