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COVER LETTER

Division of Corporations
NAME OF CORPORATION: INVERSIONES RIBBICIC ROMAN OF FLORIDA C.B. COR
DOCUMENT NUMBER: P 14000068666
The enclosed Articles of Amendment and fee are submitted for filing.
Please return all correspondence concerning this matter to the following:
JUNIUS ROANE RIDDICK IN RUSA TRUCASIONES RIDDICK ROMAN OF FLURION C.A. CURP Firm/Company J0875 SW JJZND BVE JUL MIANU + 33176 Address
City/ State and Zip Code
Lunius Riddick That Wall Com E-mail address: (to be used for future annual report notification)
For further information concerning this matter, please call:
SUNIUS R. RIDDICK TO ROSA at 1 407, 3075018 Name of Contact Person Area Code & Daytime Telephone Number
Name of Contact Person Area Code & Daytime Telephone Number
Enclosed is a check for the following amount made payable to the Florida Department of State;
S35 Filing Fee Certificate of Status Certified Copy Certified Copy (Additional Copy (Additi

Mailing Address
Amendment Section
Division of Corporations
P.O. Box 6327
Tallahassee, FL 32314

TO: Amendment Section

Street Address
Amendment Section
Division of Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, FL 32301

is enclosed)

Articles of Amendment

to Articles of Incorporation

INVERSIONES PRIDDICK ROMAN OF FLORION C.B. COMED	
(Name of Corporation as currently filed with the Florida Dept. of State) 2019 JAH 17 DM	
P 140000 68 666 SECO. PA 4:	27
(Document Number of Corporation (if known)	
Pursuant to the provisions of section 607.1006, Florida Statutes, this <i>Florida Profit Corporation</i> adopts the following amendment(8) for FL its Articles of Incorporation:	1.1
A. If amending name, enter the new name of the corporation:	
The new	
name must be distinguishable and contain the word "corporation," "company," or "incorporated" or the abbreviation "Corp.," "Inc.," or Co.," or the designation "Corp.," "Inc.," or "Co". A professional corporation name must contain the word "chartered," "professional association," or the abbreviation "P.A."	
B. Enter new principal office address, if applicable: 5988 BENT PINE DR	
(Principal office address <u>MUST BE A STREET ADDRESS</u>)	
ORIANDOF132822-334	
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX) 5988 Ben't Pince DR APT 277 UNINKOOFI 32822.334	{
D. If amending the registered agent and/or registered office address in Florida, enter the name of the	
new registered agent and/or the new registered office address:	
Name of New Registered Agent JONIUS ROBNE BIDDICK LA ROSA	
5988 BENT PINE ON DOL 277 (Florida street address)	
New Registered Office Address: ORIGNO Florida 32822-334	
(City) (Zip Code)	
New Registered Agent's Signature, if changing Registered Agent:	
I hereby accept the appointment as registered agent. I am familiar with and accept the obligations of the position.	
Junear .	
Signature of New Registered 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	<u>PT</u>	<u>John Doe</u>	
X Remove	<u>V</u>	Mike Jones	
X Add	\underline{SV}	Sally Smith	
Type of Action (Check One)	Title	<u>Name</u>	<u>Addres</u> s
1) Change		EVERIST GARCÍN	JVA DUSII WE EF801
Add			707
X Remove			Mismi, F1 33176
2) Change	M	RUBUNDY MANIA GARILLO	5988 BENT PINE
× Add			DR NOT 277
Remove			ORIAMO,71 32822-334
3) Change	M	STEPHAN R. LOPEZ	5988 BENT PINE
× Add			DR APT 277
Remove			ORIANIDO, F-132822-33
4) Change			
Add			
Remove			
5) Change			
Add			
Remove			
6) Change	,		
Add			
Remove			

If an amendment provides for an exchange, reclassification, or cancellation of issued shares, provisions for implementing the amendment if not contained in the amendment itself: (i) not applicable, indicate is/4) N	Attach additional sheets, if necessary).	icles, enter change(s) here: (Be specific)
provisions for implementing the amendment if not contained in the amendment itself: (if not applicable, indicate N/A)	NA	
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· [•	provisions for implementing the amer	ndment if not contained in the amendment itself:
	· [•	
	10/12	

The date of each amendment(s) adoption:	_, if other than the
date this document was signed.	
Effective date if applicable: (no more than 90 days after amendment file date)	
Note: If the date inserted in this block does not meet the applicable statutory filing requirements, this date will document's effective date on the Department of State's records.	not be listed as the
Adoption of Amendment(s) (CHECK ONE)	
☐ The amendment(s) was/were adopted by the shareholders. The number of votes cast for the amendment(s) by the shareholders was/were sufficient for approval.	
☐ The amendment(s) was/were approved by the shareholders through voting groups. The following statement must be separately provided 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	
hy	
(voting group)	
☐ The amendment(s) was/were adopted by the board of directors without shareholder action and shareholder action was not required.	
The amendment(s) was/were adopted by the incorporators without shareholder action and shareholder action was not required.	
Dated_01 - 10 - 2019	
Signature Manual C	
(By a director, president or other officer – if directors or officers have not been selected, by an incorporator – if in the hands of a receiver, trustee, or other court appointed fiduciary by that fiduciary)	_
LUNIUS ROBNE RIBBICK LA BUSA	
(Typed or printed name of person signing)	
-PRESIDENTE	

(Title of person signing)