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| PICK-UP WAIT MAIL |
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| (Business Entity Name) |
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| Certified Copies Certificates of Status |
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| Special Instructions to Filing Officer: |
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SECRETARY OF STATE
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COVER LETTER

TO: Amendment Section Division of Corporations

| NAME OF CORPOR | ATION: 5 SUAREZ GROU | JP INC | | | |
|--|---|--|-------------------------------|-----------------|---|
| DOCUMENT NUMB | | | | | |
| The enclosed Articles | of Amendment and fee are su | bmitted for filing. | | | |
| Please return all corres | pondence concerning this ma | tter to the following: | | | |
| HECTOR R PARADISI | | | | | |
| - | | Name of Contact Persor | 1 | | |
| | 5 SUAREZ GROUP, INC | | | | |
| • | - | Firm/ Company | | | |
| | 20 BOXWOOD RD | | | | |
| - | | Address | | | |
| | HOLLYWOOD, FL. 33021 | | | | |
| - | City/ State and Zip Code | | | | |
| paradisil@hotmail.com | | | | | |
| - | E-mail address: (to be us | sed for future annual report | notification) | | |
| | | | | | |
| For further information | concerning this matter, plea | se call: | | 20 | $\mathcal{A}_{\underline{\mathcal{U}}}$ |
| HECTOR R PARADIS | 31 | at (786 | 256-1431 | : : | 25 |
| Name of Contact Person | | | de & Daytime Telephone Number | | - 유행공 - 유행공 |
| Enclosed is a check for | the following amount made | payable to the Florida Depa | ertment of State: | -0 | 100 m |
| □ \$35 Filing Fee | ☐\$43.75 Filing Fee & Certificate of Status | □\$43.75 Filing Fee & Certified Copy (Additional copy is enclosed) | Certificate of Status | <u>အ</u> (၁) | ARY OF STATE |
| Mailing Address Amendment Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314 | | Street Address Amendment Section Division of Corporations The Centre of Tallahassee 2415 N. Monroe Street, Suite 810 | | | |

Tallahassee, FL 32303

Articles of Amendment to Articles of Incorporation of

| State) | |
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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> 171</u> | John Doe | |
|----------------------------|-------------|-------------------|-----------------------------|
| X Remove | <u>v</u> | Mike Jones | |
| X Add | <u>SV</u> | Sally Smith | |
| Type of Action (Check One) | Title | Name | Address |
| 1) Change | P | MIGUEL A SUAREZ | 1952 WATER RIDGE DR |
| Add | | | WESTON, FL. 33326 |
| X Remove 2) Change | P | MILAGROS M SUAREZ | 13368 NW 2ND. COURT APT 114 |
| X Add | | | PLANTATION, FL. 33325 |
| Remove Change | D | MILAGROS M SUAREZ | 609 E SHERIDAN ST APT 308 |
| Add | | | DANIA BEACH, FL. 33004 |
| X Remove | | | |
| 4) Change | | | |
| Add | | | |
| Remove | | | |
| 5) Change | | | |
| Add | | | |
| Remove | | | |
| 6)Change | | | . <u></u> |
| Add | | | |
| Remove | | | |

| | ing additional Artic eets, if necessary). | (Be specific) | | | | |
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| an amendment or | rovides for an excha | inge, reclassificat | t <u>ion, or cancellati</u> | on of issued share | <u>s.</u> | |
| amenument pi | lementing the amen | dment it not con | tained in the ame | ndment itself: | | |
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| The date of each amendment(s) adoption: | , if other than the |
|--|---|
| 06/01/2020 | , |
| Effective date if applicable: (no more than 90 days after amendment fi | le date) |
| Note: If the date inserted in this block does not meet the applicable statutory filing requidocument's effective date on the Department of State's records. | irements, this date will not be listed as the |
| Adoption of Amendment(s) (CHECK ONE) | |
| ☐ The amendment(s) was/were adopted by the incorporators, or board of directors without action was not required. | shareholder action and shareholder |
| The amendment(s) was/were adopted by the shareholders. The number of votes east for by the shareholders was/were sufficient for approval. | the amendment(s) |
| ☐ The amendment(s) was/were approved by the shareholders through voting groups. The must be separately provided for each voting group entitled to vote separately on the am | ~ |
| "The number of votes cast for the amendment(s) was/were sufficient for approval | 1 |
| by | , |
| Signature (By a director, president or other officer – if directors or officer selected, by an incorporator – if in the hands of a receiver, trus appointed fiduciary by that fiduciary) HECTOR R PARADISI (Typed or printed name of person signing) SECRETARY | |
| (Title of person signing) | |