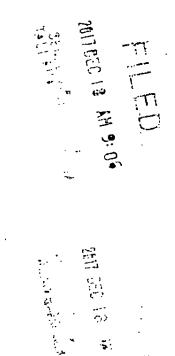
P14000102376

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DEC 22 2017
I ALBRITTON

CORPORATION SERVICE COMPANY 1201 Hays Street

Tallhassee, FL 32301 Phone: 850-558-1500

ACCOUNT NO. : I2000000195

REFERENCE: 960722 8116856

20.

AUTHORIZATION : Sould be say

COST LIMIT : (\$´35′.00

ORDER DATE : December 18, 2017

ORDER TIME : 10:08 AM

ORDER NO. : 960722-005

CUSTOMER NO: 8116856

DOMESTIC AMENDMENT FILING

NAME: MIAKO, INC.

EFFECTIVE DATE:

XX ARTICLES OF AMENDMENT
RESTATED ARTICLES OF INCORPORATION

PLEASE RETURN THE FOLLOWING AS PROOF OF FILING:

CERTIFIED COPY

PLAIN STAMPED COPY

CERTIFICATE OF GOOD STANDING

CONTACT PERSON: Roxanne Turner -- EXT#

EXAMINER'S INITIALS:

(a

COVER LETTER

TO: Amendment Section Division of Corporations

Tallahassee, FL 32314

NAME OF CORPORATION: MIAKO, INC.
DOCUMENT NUMBER: P1400J07376
The enclosed Articles of Amendment and fee are submitted for filing.
Please return all correspondence concerning this matter to the following:
CRISTINA MAFIA SORGE.
Name of Contact Person
JIINE JET STREET 2" FLOOR MIANI , FLO F 104 33132 City/ State and Zip Code
MIAMI, FLOFIDA 33132
C-1517NASORGIAMAA.COM
E-mail address: (to be used for future annual report notification) For further information concerning this matter, please call:
Name of Contact Person at () Area Code & Daytime Telephone Number
Enclosed is a check for the following amount made payable to the Florida Department of State:
Certificate of Status (Additional copy is enclosed) Certificate Of Status Certificate Of
Mailing Address Amendment Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314 Street Address Amendment Section Division of Corporations Clifton Building

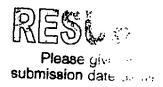
2661 Executive Center Circle Tallahassee, FL 32301



December 19, 2017

CORPORATION SERVICE COMPANY % ROXANNE TURNER 1201 HAYS STREET TALLAHASSEE, FL 32301

SUBJECT: MIAKO, INC. Ref. Number: P14000102376



We have received your document for MIAKO, INC.. However, the document has not been filed and is being returned for the following:

If the corporation is a **PROFIT** corporation it must be signed 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.

If the corporation is a **NOT FOR PROFIT** corporation it must be signed by the chairman or vice chairman of the board, president or other officer - if directors have not been selected, by an incorporator - if in the hands of a receiver, trustee, or other court appointed fiduciary, by that fiduciary.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6050.

Irene Albritton
Regulatory Specialist II

Letter Number: 617A00025591

 $G_{\mathcal{F}}$

Articles of Amendment to Articles of Incorporation of

(Name of Corporation	on as currently filed with the	Florida Dept. of State)
WIAKO INC. 614000	102376	
(Docum	nent Number of Corporation (if	known)
Pursuant to the provisions of section 607.1006, Florida its Articles of Incorporation:	a Statutes, this <i>Florida Profit C</i>	orporation adopts the following amendment(s) to
A. If smending name, enter the new name of the co	rporation:	
name must be distinguishable and contain the word "Corp.," "Inc.," or Co.," or the designation "Corp.," word "chartered," "professional association," or the a	d "corporation," "company," " "Inc," or "Co". A professi abbreviation "P.A."	The new or "incorporated" or the abbreviation on the corporation name must contain the
B. Enter new principal office address, if applicable: Principal office address MUST BE A STREET ADDI	BECC V	
Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX) If amending the registered agent and/or registered new registered agent and/or the new registered of Name of New Registered Agent	d office address in Florida, en Mice address:	eter the name of the
	(Florida street address)	
New Registered Office Address:	(City)	Florida (Zip Code)
w Registered Agent's Signature, if changing Registe ereby accept the appointment as registered agent. I an	ered Agent: m familiar with and accept the re of New Registered Agent, if o	obligations of the position.

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)

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 = ChiefExecutive 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.

Evample:		т, эт из ин жии,	•
X Change	<u>PT</u> <u>Joh</u>	n Doe	
X Remove	<u>V</u> <u>Mik</u>	ec Jones	
_X Add	<u>SV</u> <u>Sall</u>	y Smith	
Type of Action (Check One)	<u>Title</u>	<u>Name</u>	<u>Addres</u> s
1) Change	<u>DS</u>	A MANUEL GARCIA	111 NE 151 STREET
Add **Remove			200 FLOOF, PLEAME, FLOCENA 33132
2) Change	DS	MARCOR SORGE	JIJ NE JST STREET
Remove 3) Change Add			FLOFIDA 33132
5) Change Add Remove			
6) Change Add			
Remove			

ttach additional sheets, if necessary).	cles, enter change(s) h (Be specific)			
				
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1				
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an amendment provides for an exc	hanga realassification	or cancellation of	fissued shares	
provisions for implementing the am	endment if not contain	ed in the amendme	ent itself:	
(if not applicable, indicate N/A)				
(5)				
			· ··	
				
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The date of each amendment(s) adoption:	, if other than th
Effective date <u>if applicable:</u>	
(no more than 90 days ofter amendment file date)	
Note: If the date inserted in this block does not meet the applicable statutory filing requirements, this didocument's effective date on the Department of State's records.	ate will not be listed as the
Adoption of Amendment(s) (CHECK ONE)	
The amendment(s) was/were adopted by the shareholders. The number of votes east for the amendment by the shareholders was/were sufficient for approval.	(s)
☐ The amendment(s) was/were approved by the shareholders through voting groups. The following statem must be separately provided for each voting group entitled to vote separately on the amendment(s):	ent
"The number of votes east for the amendment(s) was/were sufficient for approval	
by	
(voting group)	
The amendment(s) was/were adopted by the board of directors without shareholder action and sharehold action was not required.	cī
The amendment(s) was/were adopted by the incorporators without shareholder action and shareholder action was not required. 12/21/2017	
appointed fiduciary by that fiduciary)	п
MARCO SORGI	
(Typed or printed name of person signing)	
DIRECTOR	
(Title of person signing)	