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COVER LETTER

Division of Corpora	itions			
NAME OF CORPORA	TION: <u>boteròs</u>	5 Group Inc	2	
DOCUMENT NUMBE	R:			
The enclosed Articles of	Amendment and fee are su	bmitted for filing.		
Please return all correspo	ondence concerning this ma	tter to the following:		
	CHRIS		······	_
		Name of Contact Person	n	
_				_
<u>.</u>	2010 west	Tennessee	ST	_
-	Tallahassee	Address	. /	
	1 allahassee	FI - 3230 City/ State and Zip Cod		
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Sof	er Periodon	pan ret m	and suffer force	tallahassee @ gmail.com
	Sora Perros	ed for future annual report	notification)	J may con
For further information c	oncerning this matter, pleas	0		
Christian		1 oy 1 a	ode & Daytime Telephone Num	
Name of	Contact Person .	Area Co	de & Daytime Telephone Num	ber
Enclosed is a check for the	he following amount made	payable to the Florida Depa	artment of State:	
□ \$35 Filing Fee	□\$43.75 Filing Fee & Certificate of Status	☑\$43.75 Filing Fee & Certified Copy (Additional copy is enclosed)	□\$52.50 Filing Fee Certificate of Status Certified Copy (Additional Copy is enclosed)	
	ig Address Iment Section		Address Iment Section	
Amene	arrent occurr	ATHER	arrent devilor	

Amendment Section
Division of Corporations
P.O. Box 6327
Tallahassee, F1, 32314

TO: Amendment Section

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

Articles of Amendment

to

Articles of Incorporation

f

Botero's group inc

	1,00,1	<u> </u>			
(Name of Corpo	ration as currently	y filed with the Florida D	ept. of State)		
(De	ocument Number of	Corporation (if known)			
Pursuant to the provisions of section 607.1006, Floits Articles of Incorporation:	orida Statutes, this I	Florida Profit Corporation	$oldsymbol{n}$ adopts the follo	awing amendmen	t(s)
A. If amending name, enter the new name of the	ie corporation:				
name must be distinguishable and contain the "Corp.," "Inc.," or Co.," or the designation "C word "chartered," "professional association," or	Corp," "Inc," or "C	Co'. A professional corp			
B. Enter new principal office address, if applie (Principal office address MUST BE A STREET)					
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE	<u>' BOX</u>)				
D. If amending the registered agent and/or registered agent and/or the new registered.			name of the		
Name of New Registered Agent			~~		
New Registered Office Address:	(Florida stre	et address)	. Florida	2018 00	
New Registered Agent's Signature, if changing I hereby accept the appointment as registered age	Registered Agent:				
r nevery accept the appointment as registered age	na. 1 am jamatar w	un ana accept me omigat	iora oj ine postii	2:49	
	Signature of New Re	egistered Agent, if changir	ıg		

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.

Example: X Change	PT John	Doe	
X Remove	<u>V</u> <u>Mike</u>	<u>Jones</u>	
<u>X</u> Add	SV Sally	Smith	
Type of Action (Check One)	<u>Title</u>	<u>Name</u>	<u>Addres</u> s
1) Change			
_ X _ Add	V	ADOOIFO HOILMANN	19956 NW 115T
Remove		•	Pembroke Pines F1-33026
2) Change			
Add			
Remove			
3) Change			
Add			
Remove			
4) Change			
Add			
Remove			
5) Change			
Add			
Remove			
6) Change			
Add			
Remove			

. If amending or adding additional Arti (Attach additional sheets, if necessary).	(Be specific)
	
If an amendment provides for an exch	ange, reclassification, or cancellation of issued shares,
(if not applicable, indicate N/A)	idment if not contained in the amendment itself:
	·

date this document was signed.	ioption:, il (other than the
Effective date if applicable:	10 - 25 - 18 (no more than 90 days after amendment file date)	
	(no more than 90 days after amendment file date)	
Note: If the date inserted in this b document's effective date on the De	lock does not meet the applicable statutory filing requirements, this date will not be partment of State's records.	: listed as the
Adoption of Amendment(s)	(CHECK ONE)	
☐ The amendment(s) was/were ado by the shareholders was/were su	pted by the shareholders. The number of votes cast for the amendment(s) flicient for approval.	76
☐ The amendment(s) was/were app must be separately provided for	roved by the shareholders through voting groups. The following statement 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	
by	(voting group)	
	(voting group)	
☐ The amendment(s) was/were ado action was not required.	pted by the board of directors without shareholder action and shareholder	
The amendment(s) was/were adopaction was not required.	pted by the incorporators without shareholder action and shareholder	
	25-2018, 1 D	
selected	rector, president or other officer – if directors or officers have not been , by an incorporator – if in the hands of a receiver, trustee, or other court ed fiduciary by that fiduciary)	• • •
_	Christian D I QE 2 (Typed or printed name of person signing)	
	(Typed or printed name of person signing)	-
_	Owner	
	(Title of person signing)	_