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COVER LETTER

TO: Amendment Section Division of Corporation			,
NAME OF CORPOR	ATION: SIANO'S 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:	
	SARA FLOREZ		
		Name of Contact Persor	1
	FLOREZ ACCOUNTING &	TAX SOLUTIONS	
		Firm/ Company	
	8051 N TAMIAMI TRAIL#	A9	
•		Address	
	SARASOTA, FL 34243		
		City/ State and Zip Code	2
	SFACCOUNTINGSOLUTIC	NS@YAHOO.COM	
	E-mail address: (to be us	ed for future annual report	notification)
For further information	n concerning this matter, pleas	se call:	
SARA FLOREZ		at (5275-5831
Name o	f Contact Person	Area Co	de & Daytime Telephone Number
Enclosed is a check for	the following amount made	payable to the Florida Depa	artment of State:
■ \$35 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)
Ame Divis P.O.	ing Address ndment Section sion of Corporations Box 6327 thassee, FL 32314	Amend Divisio The Co 2415 N	Address ment Section n of Corporations entre of Tallahassee N. Monroe Street, Suite 810 essee, FL 32303

Articles of Amendment to Articles of Incorporation of

SIANO'S INC	
(Name of Corporation as current	tly filed with the Florida Dept. of State)
P15000034452	
(Document Number	of Corporation (if known)
Pursuant to the provisions of section 607,1006, Florida Statutes, this its Articles of Incorporation:	s Florida Profit Corporation adopts the following amendment(s) to
A. If amending name, enter the new name of the corporation:	
	T/
name must be distinguishable and contain the word "corporation," "Inc.," or Co.," or the designation "Corp," "Inc," or "Co". "chartered," "professional association," or the abbreviation "P.A.	A professional corporation name must contain the word
B. Enter new principal office address, if applicable: (Principal office address MUST BE A STREET ADDRESS)	
	
C. Enter new mailing address, if applicable:	
(Mailing address MAY BE A POST OFFICE BOX)	72
	- 2 - 13 - 13 - 13 - 13 - 13 - 13 - 13 -
D. If amending the registered agent and/or registered office add	dress in Florida, enter the name of the
new registered agent and/or the new registered office address	<u>58:</u>
Name of New Registered Agent	
(Florida s	treet address)
New Registered Office Address:	, Florida
	(City) (Zip Code)
New Registered Agent's Signature, if changing Registered Agent I hereby accept the appointment as registered agent. I am familiar	it: with and accept the obligations of the position.
Signature of New 1	Registered Agent, if changing
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)

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.

Example:

X Change	<u>PT</u> <u>Jo</u>	ohn Doe	
X Remove	<u>V</u> <u>N</u>	fike Jones	
X Add	<u>SV</u> <u>S</u>	ally Smith	
Type of Action (Check One)	<u>Title</u>	<u>Name</u>	<u>Addres</u> s
I) Change	S	IARA SIANO	3401 66th St Ct W
X Add			Bradenton, FL 34209
Remove			
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)
· · · · · · · · · · · · · · · · · · ·	
provisions for implementing the ame.	nange, reclassification, or cancellation of issued shares, and ment if not contained in the amendment itself:
(if not applicable, indicate N/A)	

The date of each amendment(s) adoption:	, if other than th
date this document was signed. 06/01/2021	
Effective date if applicable: (no more than 90 days after amen	Amount file date)
ino more man 90 days after amen	ament file date)
Note: If the date inserted in this block does not meet the applicable statutory fil document's effective date on the Department of State's records.	ing requirements, this date will not be listed as th
Adoption of Amendment(s) (CHECK ONE)	
■ The amendment(s) was/were adopted by the incorporators, or board of directors action was not required.	without shareholder action and shareholder
☐ The amendment(s) was/were adopted by the shareholders. The number of votes by the shareholders was/were sufficient for approval.	cast for the amendment(s)
☐ The amendment(s) was/were approved by the shareholders through voting group must be separately provided for each voting group entitled to vote separately of	
"The number of votes cast for the amendment(s) was/were sufficient for a	pproval
by	"
(voting group)	
06/01/2021	
Dated	
Signature	
#15y-a director, president or other officer - if directors of	or officers have not been
selected, by an incorporator – if in the hands of a recei appointed fiduciary by that fiduciary)	ver, trustee, or other court
JONATAN SIANO	
(Typed or printed name of person si	gning)
VP	
(Title of person signing)	

Commence of the second