P150000044014

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COVER LETTER

TO: Amendment Section Division of Corporations

NAME OF CORPOR	ATION: MULANI CORP		<u></u>		
DOCUMENT NUMB	P1500003.401.4	·			
The enclosed Articles of	of Amendment and fee are su	ibmitted for filing.			
Please return all corresp	pondence concerning this ma	itter to the following:			
	NEGAR GRANADO DAVI	LA			
-		Name of Contact Person			
	BOLIVAR & GRANADO CONSULTING, LLC				
-		Firm/ Company	.		
;	8180 NW 36TH ST. SUITE				
-	<u> </u>	Address			
	DORAL, FLORIDA, 33166				
-		City/ State and Zip Code			
negarg	ranado@gmail.com	sed for future annual report	notification		
	17-man address, (W Ve u.	sed for fatare annual report	in (in the interest of the int		
For further information	concerning this matter, pleas	se call:			
NEGAR GRANADO DAVILA		786 at (4689790		
Name of Contact Person			le & Daytime Telephone Number		
Enclosed is a check for	the following amount made	payable to the Florida Depar	rtment of State:		
□ \$35 Filing Fee	☐\$43.75 Filing Fee & Certificate of Status	□\$43.75 Filing Fee & Certified Copy (Additional copy is enclosed)	S52.50 Filing Fee Certificate of Status Certified Copy (Additional Copy is enclosed)		
Mailing Address Amendment Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314		Amendi Divisio Clifton	Address ment Section n of Corporations Building secutive Center Circle		

Tallahassee, FL 32301

Articles of Amendment to Articles of Incorporation of

MULANI CORP		
(Name of Corporation	as currently filed with the Florida Dept	. of State)
P15000044014		
(Docume)	nt Number of Corporation (if known)	•
Pursuant to the provisions of section 607,1006, Florida S its Articles of Incorporation:	Statutes, this Florida Profit Corporation ac	lopts the following amendment(s) to
A. If amending name, enter the new name of the corp	poration:	
NONE		The new
name must be distinguishable and contain the word "Corp.," "Inc.," or Co.," or the designation "Corp." word "chartered," "professional association." or the al	"Inc," or "Co". A professional corpora	
B. Enter new principal office address, if applicable;	NONE	
(Principal office address MUST BE A STREET ADDR	<u>(ESS</u>)	201 SE
		20 E T
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)) NONE	0-9
		<u> </u>
D. If amending the registered agent and/or registered new registered agent and/or the new registered of		ne of the
Name of New Registered Agent NONE		
	(Florida street address)	
New Registered Office Address:		. Florida
	(City)	(Zip Code)
New Registered Agent's Signature, if changing Regist	torad Agant	
Thereby accept the appointment as registered agent. To		s of the position.
Signati	ure 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)

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 Doc, PT as a Change, Mike Jones, V as Remove, and Sally Smith, SV as an Add.

X Change	PT	John Do	<u>oe</u>	
X Remove	<u>V</u>	Mike Jo	ones	
X Add	<u>sv</u>	Sally St	nith	
Type of Action (Check One)	<u>Title</u>		<u>Name</u>	<u>Addres</u> s
1) Change	P		MARIA C TORRES DE LA CORTE	2641 N FLAMINGO, UNIT 1908N
Add				SUNRISE, FLORIDA, 33323
X Remove				
2) Change	p		JOAQUIN SAYALERO TORRES	14324 SW 10TH ST. UNIT 2408
X Add				PEMBROKE PINE, FLORIDA
Remove				33027
3) Change		_		
Add				
Remove				
4) Change		_		<u> </u>
Add				
Remove				
5) Change		_		-
Add				
Remove				
6) Change				
Add				
Remove				

E. If amending or adding additional Articles, enter change(s) here: (Attach additional sheets, if necessary). (Be specific)
NONE
F. 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:
(if not applicable, indicate N/A)
NONE
······································

The date of each amendment(s) adoption:
date this document was signed.
JULY 31TH, 2018 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 not be listed a document's effective date on the Department of State's records.
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
by"
(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 Signature Signature
(B) 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)
MARIA DEL CARMEN TORRES DE LA CORTE
(Typed or printed name of person signing)
(Title of person signing)