P150000 62871

(Requestor's Name)				
(Address)				
(Address)				
(City/State/Zip/Phone #)				
PICK-UP WAIT MAIL				
(Business Entity Name)				
(Document Number)				
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Solution Day 1. 18 TO: Amendment Section Division of Corporations DIMACA GALLERY & FRAMES INC. NAME OF CORPORATION: P15000062871 DOCUMENT NUMBER: The enclosed Articles of Amendment and fee are submitted for filing. Please return all correspondence concerning this matter to the following: Luis E Gonzalez Name of Contact Person Global Financial Solutions Firm/ Company 170 Ocean Lane Dr. Unit 705 Address Key Biscayne, Florida 33149 City/ State and Zip Code lougonza52@gmail.com E-mail address: (to be used for future annual report notification) For further information concerning this matter, please call: Luis E Gonzalez Area Code & Davtime Telephone Number Name of Contact Person Enclosed is a check for the following amount made payable to the Florida Department of State: ☐ \$35 Filing Fee ■\$43.75 Filing Fee & □\$43.75 Filing Fee & □\$52.50 Filing Fee Certified Copy Certificate of Status Certificate of Status (Additional copy is Certified Copy enclosed) (Additional Copy is enclosed)

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 Articles of Incorporation of

Articles of Amendment	Dept. of State)
to	جے 💸
Articles of Incorporation	
of	
DIMACA GALLERY & FRAMES INC.	
(Name of Corporation as currently filed with the Florida	Dept. of State)
P15000062871	
(Document Number of Corporation (if known)	Ø
Pursuant to the provisions of section 607.1006, Florida Statutes, this <i>Florida Profit Corporations</i> Articles of Incorporation:	on adopts the following amendment(s) to
. If amending name, enter the new name of the corporation:	
MARCOS DIMACA INC.	77
name must be distinguishable and contain the word "corporation," "company," or "incorpora Inc.," or Co.," or the designation "Corp," "Inc," or "Co". A professional corporation chartered," "professional association," or the abbreviation "P.A."	
3. Enter new principal office address, if applicable: Principal office address <u>MUST BE A STREET ADDRESS</u>)	
Enter new mailing address, if applicable:	
(Mailing address MAY BE A POST OFFICE BOX)	
D. If amending the registered agent and/or registered office address in Florida, enter the new registered agent and/or the new registered office address:	e name of the
Name of New Registered Agent	
(Florida street address)	
New Registered Office Address: (City)	, Florida (Zip Code)
(Aug)	in the second second
Sew Registered Agent's Signature, if changing Registered Agent: hereby accept the appointment as registered agent.—I am familiar with and accept the oblig-	ations of the position.
Signature of New Registered Agent, if chang	ing

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>PT</u>	<u>John Do</u>	<u>oe</u>	
X Remove	<u>V</u>	Mike Jo	nes	
X Add	<u>sv</u>	Sally Sn	<u>nith</u>	
Type of Action (Check One)	<u>Title</u>		Name	<u>Addres</u> s
1) Change		_		
Add				
Remove				
2) Change		_		
Add				
Remove 3) Change		_		
Add				
Remove				
4) Change		_		
Add				
Remove				
5) Change		_		
Add				
Remove				
6) Change				
Add	<u></u>			
Remove				

If amending or adding additional Articles, enter change(s) here: Attach additional sheets, if necessary). (Be specific)				
•				
<u> </u>				
an amendment provides for an exc	hange, reclassification, or cancellation of issued shares,			
provisions for implementing the am	endment if not contained in the amendment itself:			
(if not applicable, indicate N/A)				
_ _				

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The date of each amendment(s) a	doption:	, if other than the
date this document was signed.		
Effective date if applicable:		
	(no more than 90 days after amendment file date)	
Note: If the date inserted in this bedocument's effective date on the De	plock does not meet the applicable statutory filing requirement epartment of State's records.	s, this date will not be listed as the
Adoption of Amendment(s)	(CHECK ONE)	
■ The amendment(s) was/were adaction was not required.	opted by the incorporators, or board of directors without shareho	older action and shareholder
☐ The amendment(s) was/were ad by the shareholders was/were s	opted by the shareholders. The number of votes cast for the amoufficient for approval.	endment(s)
	proved by the shareholders through voting groups. The followin each voting group entitled to vote separately on the amendmen	
"The number of votes cast	for the amendment(s) was/were sufficient for approval	
by	."·	
,	(voting group)	
01/17/202 Dated		
Signature	1/1/2 /2/2	
selecte	hrector, president or other officer – if directors or officers have and, by an incorporator – if in the hands of a receiver, trustee, or other fiduciary by that fiduciary)	not been other court
	HECTOR IGUINI	
	(Typed or printed name of person signing)	
	PRESIDENT	
	(Title of person signing)	