P16000052240

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1.

Carrier Table

COVER LETTER

2619 SEP 20 PM 2: 3 **Division of Corporations** NAME OF CORPORATION: CARDI CORP DOCUMENT NUMBER: P16000052240 The enclosed Articles of Amendment and fee are submitted for filing. Please return all correspondence concerning this matter to the following: **CARMEN HUERTAS** Name of Contact Person FREEDOMTAX Firm/ Company 1016 E OSCEOLA PKWY Address KISSIMMEE City/ State and Zip Code fedexocala@outlook.com E-mail address: (to be used for future annual report notification) For further information concerning this matter, please call: _ at (________) 360-2597
Area Code & Daytime Telephone Number ROBERTO I CARLEVARO Name of Contact Person Enclosed is a check for the following amount made payable to the Florida Department of State: S35 Filing Fee □\$43.75 Filing Fee & □\$43.75 Filing Fee & □\$52.50 Filing Fee Certificate of Status Certificate of Status Certified Copy Certified Copy (Additional copy is enclosed) (Additional Copy is enclosed) Street Address Mailing Address

Amendment Section **Division of Corporations** P.O. Box 6327 Tallahassee, FL 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 of

(Name of	f Corporation as curren	tly filed with the Florida Dept. of State)
P16000052240		21 50 77
	(Document Number	of Corporation (if known)
Pursuant to the provisions of section 607.1 its Articles of Incorporation:	006, Florida Statutes, this	s Florida Profit Corporation adopts the following
A. If amending name, enter the new na-	me of the corporation:	
	ttion "Corp," "Inc," or	on," "company," or "incorporated" or the abb "Co". A professional corporation name must co
B. Enter new principal office address, if applicable:		14422 Shoreside Way Suite 110-242
(Principal office address MUST BE A ST		Winter Garden, FL 34787
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)		14422 Shoreside Way Suite 110-242
		Winter Garden, FL 34787
D. If amending the registered agent and new registered agent and/or the new Name of New Registered Agent	registered office addres	ss:
	14422 Shoreside Way Su	
,	<i>(F tortaa s</i> Winter Garden	treet address) 34787
New Registered Office Address:		(City) , Florida (Zip Co
New Registered Agent's Signature, if ch I hereby accept the appointment as registe		t: with and accept the obligations of the position.
	Signature of New	Registered Agent, if changing

address of each Officer (Attach additional sheet. Please note the officer/d P = President; V= Vice Executive Officer; CFO held. President, Treasur Changes should be note	and/or I s, if neces. lirector tit Presiden = Chief er, Direct d in the fo	sary) le by the first letter of the office title: t; T= Treasurer; S= Secretary; D= Director; The Financial Officer. If an officer/director holds m for would be PTD. bllowing manner. Currently John Doe is listed as corporation, Sally Smith is named the V and S. The	R= Trustce; C = Chairman or Clert ore than one title, list the first lette the PST and Mike Jones is listed as
X Change	<u>PT</u>	John Doc	
X Remove	V	Mike Jones	
X Add	<u>SV</u>	Sally Smith	5
Type of Action (Check One)	<u>Title</u>	<u>Name</u>	Address
1) X Change	P	Roberto I. Carlevaro	14897 Evergreen Oak Loop
Add			Winter Garden, FL 34787
Remove			
2) X Change	VP	Leticia Di Carlo	14897 Evergreen Oak Loop
Add			Winter Garden, FL 34787
Remove			
3) Change			
Add			
Remove			
4) Change			
Add			
Remove			
5) Change			
Add			
Remove			
6) Change	<u>.</u>		
Add			
Remove			

Attach additional sheets, if necessary). (Be specific)	
	<u> </u>
	<u> </u>
	
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)	
(y noi applicance, maleure (1771)	

The date of each amendment(s) adopt date this document was signed.	ion:	_, i
Effective date if applicable:		
	(no more than 90 days after amendment file date)	
Note: If the date inserted in this block document's effective date on the Depart	does not meet the applicable statutory filing requirements, this date will ment of State's records.	not
Adoption of Amendment(s)	(CHECK ONE)	
☐ The amendment(s) was/were adopted by the shareholders was/were suffice	I by the shareholders. The number of votes cast for the amendment(s) ent for approval.	
	ed by the shareholders through voting groups. The following statement h 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 adopted action was not required.	d by the board of directors without shareholder action and shareholder	
The amendment(s) was/were adopted action was not required.	d by the incorporators without shareholder action and shareholder	
09.17.2019 Dated		
Signature	£	
(By a direc selected, by	tor, president or other officer – if directors or officers have not been y an incorporator – if in the hands of a receiver, trustee, or other court fiduciary by that fiduciary)	
Rol	perto I Carlevaro	
_	(Typed or printed name of person signing)	
Pre	sident	
_	(Title of person signing)	