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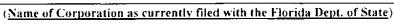
TO: Amendment Section Division of Corporations

NAME OF CORPORATIO	N:DURONIA C	ORP		
DOCUMENT NUMBER: _	P16000094304		_	
The enclosed Articles of Ame	ndment and fee are su	bmitted for filing	<u>g</u> .	
Please return all corresponden	ce concerning this ma	tter to the follow	ring:	
	MARIA G	TONANTE		
	DURON	Name of Con	itaci Persor	
		Firm/ Co	mpany	
	2000 Ponce de Leoi	n Blvd. Suite 50	09-E	
	ral Gables, FL 3313	Addr 4	'ess	
		City/ State an	vd Zin Code	
		Ongo State to	ia isip coa	•
	maria@tonante.us mail address: (to be us	ed for future an	ual renort	notification)
LJ-	man address. (to be as	ica koi tatare am	iddi report	notification,
For further information conce	ming this matter, pleas	se call:		
MARIA TONANTE		at (786	838 9973
Name of Conta	ict Person			de & Daytime Telephone Number
Enclosed is a check for the fol	lowing amount made [payable to the Fl	orida Depa	rtment of State:
	\$43.75 Filing Fee & Certificate of Status	S43.75 Filir Certified Co (Additional enclosed)	ру	☐\$52.50 Filing Fee Certificate of Status Certified Copy (Additional Copy is enclosed)
Mailing Ad Amendment Division of P.O. Box 65 Tallahassee	Section Corporations 27		Amend Divisio Clifton 2661 E	Address ment Section n of Corporations Building xecutive Center Circle ssee, FL 32301

Articles of Amendment Articles of Incorporation

of

DURONIA CORP



(Document Number of Corporation (if known)

P16000094304

ent(s) to

name must be distinguishable and contain the word "corporation," "company," or "incorporated" of "Corp.," "Inc.," or "Co.," or the designation "Corp.," "Inc.," or "Co.," A professional corporation nan word "chartered," "professional association," or the abbreviation "P.A." B. Enter new principal office address, if applicable: (Principal office address MUST BE A STREET ADDRESS) Coral Gables, FL 33134 C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX) Coral Gables, FL 33134 D. If amending the registered agent and/or registered office address in Florida, enter the name of the new registered agent and/or the new registered office address: Name of New Registered Agent 2000 Ponce de Leon Blvd. Suite 509-E (Florida street address) Coral Gables New Registered Office Address: Coral Gables Coral Gables Plorida (City) New Registered Agent's Signature, if changing Registered Agent: Thereby accept the appointment as registered agent. Tam familiar with and accept the obligations of the position of the position of the position of the positions of the position of t			
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(City) New Registered Agent's Signature, if changing Registered Agent:			
New Registered Agent's Signature, if changing Registered Agent:	33134		
	(Zip Code)		
	osition.		
(Jellinger			

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 hold. 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>	John D	<u>loe</u>	
X Remove	<u>V</u>	Mike J	<u>ones</u>	
X Add	<u>sv</u>	Sally S	mith	
Type of Action (Check One)	<u>Title</u>		Name	<u>Addres</u> s
1) Change		_	MARIA BELEN TONANTE	2000 Ponce de Leon Blvd. Suite 509-E
X Add				Coral Gables, FL 33134
Remove				
2) Change	P,S	_	MARIA GUADALUPE TONANTE	2000 Ponce de Leon Blvd. Suite 509-E
Add				Coral Gables, FL 33134
Remove				
3) Change	-	_		
Add				
Remove				
4) Change		_		
Add				
Remove				
5)Change		_		
Add				
Remove				
6) Change		_		
Add				
Remove				

	icles, enter change(s) here: (Be specific)
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	nange, reclassification, or cancellation of issued shares,
f an amendment provides for an exch	1 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2
f an amendment provides for an exch provisions for implementing the ame (if not applicable, indicate N/A)	ndment if not contained in the amendment itself:
provisions for implementing the ame	ndment if not contained in the amendment itself:
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The date of each ame	ndment(s) adoption:	, if other than the
date this document wa		
Effective date if appl	04/18/2018	
Effective date ir appli	(no more than 90 days after amendment file date)	
	erted in this block does not meet the applicable statutory filing requirements, this date will late on the Department of State's records.	ll not be listed as the
Adoption of Amenda	nent(s) (<u>CHECK ONE</u>)	
	was/were adopted by the shareholders. The number of votes cast for the amendment(s) s was/were sufficient for approval.	
☐ The amendment(s) must be separately	was/were approved by the shareholders through voting groups. The following statement provided for each voting group entitled to vote separately on the amendment(s):	
	of votes cast for the amendment(s) was/were sufficient for approval	
by P	MITER TUNANTE / DURONIA CORP)	
···	(voting group)	
	was/were adopted by the board of directors without shareholder action and shareholder	
☐ The amendment(s) action was not requ	was/were adopted by the incorporators without shareholder action and shareholder ired.	
Date	ed04/18/2018	
Sigr	nature — Celeberroe	
	(By 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 G Tonante	
	(Typed or printed name of person signing)	
	P	
	(Title of person signing)	