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COVER LETTER

TO: Amendment Section Division of Corporations

NAME OF CORPORATION: <u>HENAO</u>	INVESTMENTS PROPERTIES INC
DOCUMENT NUMBER:P17@	
The enclosed Articles of Amendment and fee are	submitted for filing.
Please return all correspondence concerning this n	natter to the following:
MARIA	Same of Contact Person
	INVESTRENTS PROPERTIES INC
	E 16TH PL, STE 101 Address
	City/ State and Zip Code
E-mail address: (to be	HENDO 8 & HOTHALL COTI used for future annual report notification)
For further information concerning this matter, plc	rase call:
MARIA GAVIRIA Name of Contact Person	at (<u>23 9</u>) <u>26 5 - 72 8 5</u> Area Code & Daytime Telephone Number
Enclosed is a check for the following amount mad	e payable to the Florida Department of State:
S35 Filing Fee & Certificate of Status	
Mailing Address Amendment Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314	Street Address Amendment Section Division of Corporations Clifton Building 2661 Executive Center Circle Tallahassee, FL 32301

Articles of Amendment to Articles of Incorporation of

LIENAC INVESTMENTS PROPERTIES INC

Name of Corporation as curren	tly filed with the Florida Dept. of State)
P170000	
	of Corporation (if known)
Pursuant to the provisions of section 607.1006, Florida Statutes, this ts Articles of Incorporation:	•
A. If amending name, enter the new name of the corporation:	
	The new
name must be distinguishable and contain the word "corporati "Corp.," "Inc.," or Co.," or the designation "Corp," "Inc," or word "chartered," "professional association," or the abbreviation	ion," "company," or "incorporated" or the abbreviation "Co". A professional corporation name must contain the
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 <u>MAY BE A POST OFFICE BOX</u>)	
D. If amending the registered agent and/or registered office ad	dress in Florida, enter the name of the
new registered agent and/or the new registered office addre-	
Name of New Registered Agent	
(Florida s	treet address)
New Registered Office Address:	(City) , Florida (Zip Code)
	, may
New Registered Agent's Signature, if changing Registered Agent hereby accept the appointment as registered agent. I am familian	
	, , , , , , , , , , , , , , , , , , ,
Sionature of New	Registered Agent, if changing
againit of acs	inguitive agent graniging

If amending the Officers and/or Directors, enter the title and name of each officer/director being removed and title, name, a 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 = ChExecutive Officer; CFO = Chief Financial Officer. If an officer/director holds more than one title, list the first letter of each offiheld. 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 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 Chang Mike Jones, V as Remove, and Sally Smith, SV as an Add.

Example: X Change	<u>PT</u>	John Doe	
X Remove	\underline{V}	Mike Jones	
<u>X</u> Add	<u>SV</u>	Sally Smith	
Type of Action (Check One)	<u>Title</u>	<u>Name</u>	<u>Addres</u> s
1) Change		CLAUDIA C. HOYOS	1423 S= 16 " PL, S
🗶 Add			CAPE CORAL - FL 33
Remove			
2) Change			
Add			
Remove			
3) Change			25 1
Add			<u>=</u> = = = = = = = = = = = = = = = = = =
Remove			22 7
4) Change			
Add			
Remove			
5) Change			
Add			
Remove			
6) Change			
Add			
Remove			

Attach additional sheets, if necessary). (Be specific)	
<u> </u>	
	
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an amendment provides for an exchange, reclassification, or cancellation of issued shares,	
an amendment provides for an exchange, reclassification, or cancellation of issued shares, provisions for implementing the amendment if not contained in the amendment itself:	· • •
orovisions for implementing the amendment if not contained in the amendment itself: (if not applicable, indicate N/A)	5
orovisions for implementing the amendment if not contained in the amendment itself: (if not applicable, indicate N/A)	· • •
(if not applicable, indicate N/A)	8: 8: 8: 8: 8: 8: 8: 8: 8: 8: 8: 8: 8: 8
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The date of each amendment(s) adoption: 504 18 2019 date this document was signed.	if other than
Effective date <u>if applicable</u> :	
(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 document's effective date on the Department of State's records.	ot be listed as
Adoption of Amendment(s) (<u>CHECK ONE</u>)	
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	
tvoting 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	-T)
☐ The amendment(s) was/were adopted by the incorporators without shareholder action and shareholder action was not required.	i
Dated 50-4 18 2019	5 8
Signature	
(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)	
JOEGE A. HENAO	
(Typed or printed name of person signing)	
PR=S, D=NT	
(Title of person signing)	