P170000321054

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COVER LETTER

TO: Amendment Secti Division of Corpo			•
NAME OF CORPOR	ATION: TURPIC CORP.		1
DOCUMENT NUMB	ER: P17000032654		1
The enclosed Articles	of Amendment and fee are s	ubmitted for filing.	•
Please return all corres	pondence concerning this ma	atter to the following:	
	TURELLA MAURIZIO		
		Name of Contact Perso	n '
	1680 MICHIGAN AVE. ST	Firm/ Company E 700	
- !	MIAMI BEACH-FL-33139	Address	1
-		City/ State and Zip Cod	e
mauriz	io@turpic.com		1
	E-mail address: (to be u	sed for future annual report	notification)
For further information	concerning this matter, pleas	se cali:	•
Turella Maurizio		at (9918544
Name of	Contact Person	Area Co	de & Daytime Telephone Number
Enclosed is a check for	the following amount made	payable to the Florida Depa	riment 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)
Amen Divisi P.O. B	ng Address dment Section on of Corporations lox 6327 assec. FL 32314	Amend Divisio Clifton 2661 E:	Address ment Section n of Corporations Building secutive Center Circle ssee, FL 32301

Articles of Amendment | to Articles of Incorporation | of

TURPIC CORPORATION (Name of Corporation as currently filed with the Florida Dept. of State) P17000032654 (Document Number of Corporation (if known) Pursuant to the provisions of section 607.1006, Florida Statutes, this Florida Profit Corporation adopts the following amendment(s) to its Articles of Incorporation: A. If amending name, enter the new name of the corporation: The new name must be distinguishable and contain the word "corporation," "company," or "incorporated" or the abbreviation "Corp.," "Inc.," or Co.," or the designation "Corp," "Inc," or "Co". A professional corporation name must contain the 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) C. 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 name of the new registered agent and/or the new registered office address: Name of New Registered Agent (Florida street address) New Registered Office Address: , Florida (City) (Zip Code) New Registered Agent's Signature, if changing Registered Agent: I hereby accept the appointment as registered agent. I am familiar with and accept the obligations of the position. Signature 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 = ChiefExecutive 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</u>	Doc	
X Remove	<u>V</u> <u>Mike</u>	Jones	1
_X Add	SV Sally	<u>Smith</u>	
Type of Action (Check One)	<u>Title</u>	Name	Address
1) Change	<u>S</u>	CRISCUOLO LUIGI	407 LINCOLN ROAD STE HC
Add			MIAMI BEACH, FL, 33139
X Remove			
2) X Change	DPTS	TURELLA MAURIZIO	VIALE BEATA VERGINE CARMELO 18 ROME 00144 IT
Add			
Remove			
3) Change			
Add			
Remove			
4) Change			·
Add			·
Remove			
5) Change			
Add			
Remove			
6) Change			
Add			
Remove			I

amending or adding additional Articles, enter chatach additional sheets, if necessary). (Be specific)		
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		·
an amendment provides for an exchange, reclassif rovisions for implementing the amendment if not (if not applicable, indicate N/A)	ication, or cancellation of issued sha contained in the amendment itself:	ores,

The date of each amendment(s) adopti	on:		, if other than the
date this document was signed.		•	
Effective date <u>if applicable</u> :		<u> </u>	<u> </u>
	(no more than 90 days	after amendment file date)	
Note: If the date inserted in this block document's effective date on the Departs	does not meet the applicable s ment of State's records.	tatutory filing requirements, thi	s date will not be listed as the
Adoption of Amendment(s)	(CHECK ONE)	1	
☐ The amendment(s) was/were adopted by the shareholders was/were sufficient	by the shareholders. The numbers for approval.	er of votes cast for the amendm	ent(s)
☐ The amendment(s) was/were approve must be separately provided for each	ed by the shareholders through voting group entitled to vote so	oting groups. The following sta eparately on the amendment(s):	dement
"The number of votes cast for t	he amendment(s) was/were suffi	cient for approval	
by	(voting group)		
The amendment(s) was/were adopted action was not required.	by the board of directors witho	ut shareholder action and share	nolder
☐ The amendment(s) was/were adopted action was not required. 09/11/2019 Dated	by the incorporators without sh	archolder action and shareholde	ਸ
selected, by	or, president or other officer - i an incurporator - if in the hand iduciary by that fiduciary)	f directors or officers have not have n	een court
τυ	RELLA MAURIZIO		
	(Typed or printed name	of person signing)	
PR	ESIDENT	1	
_	(Title of per	son signing)	