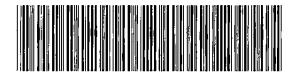
## P17000047925

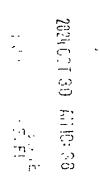
(Requestor's Name)
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## COVER LETTËR

**TO:** Amendment Section Division of Corporations

NAME OF CORPO	PRATION: FINSE INVESTM	ENTS CORP			
DOCUMENT NUM	BER: P17000047925				
	s of Amendment and fee are su	bmitted for filing.			
Please return all corr	espondence concerning this ma	tter to the following:			
	Monique Troncone				
	Name of Contact Person				
	Monique Troncone CPA, P.A	۸.			
	Firm/ Company				
	55 NE 5th Ave Suite 501				
	Address Boca Rtaon, FL 33432				
		City/ State and Zip Cod	e		
	info@troncone-cpa.com				
	E-mail address: (to be us	sed for future annual report	notification)		
For further information	on concerning this matter, pleas	se call:at (at	417-0308		
Name	of Contact Person	Area Co	de & Daytime Telephone Number		
Enclosed is a check f	or the following amount made	payable to the Florida Depa	artment of State:		
\$35 Filing Fee	□\$43.75 Filing Fee & Certificate of Status	S43.75 Filing Fee & Certified Copy (Additional copy is enclosed)	☐\$52.50 Filing Fee Certificate of Status Certified Copy (Additional Copy is enclosed)		
Mailing Address Amendment Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314		Amend Division The Co 2415 i	Address Iment Section on of Corporations entre of Tallahassee N. Monroe Street, Suite 810 assee, FL 32303		

## Articles of Amendment to Articles of Incorporation of

FINSE INVESTMENTS CORP

( <u>Name</u>	of Corporation as currently filed with the Florida l	Dept. of State)
P17000047925		•
	(Document Number of Corporation (if known)	2024007.30 K
Pursuant to the provisions of section 607	1006, Florida Statutes, this Florida Profit Corporation	m adopts the following amendmen
its Articles of Incorporation:		$\int d^{3}x dx$
A. If amending name, enter the new n	ame of the corporation:	
		The new
	nthe word "corporation." "company," or "incorporate Corp," "Inc," or "Co". A professional corporatio or the abbreviation "P.A."	
B. Enter new principal office address,	if applicable:	
(Principal office address <u>MUST BE A S</u>	TREET ADDRESS )	
C. Enter new mailing address, if appl		
(Mailing address <u>MAY BE A POST</u>	OFFICE BOX)	
D. If amending the registered agent ar	nd/or registered office address in Florida, enter the	name of the
new registered agent and/or the ne		
Name of New Registered Agent	Angel Eduardo Maldonado	
	7646 Trenton Dr	<del></del>
	(Florida street address)	<u> </u>
New Registered Office Address:	Lake Worth	. Florida 33467
	(City)	(Zip Code)
Now Dagistored Agent's Signature if a	honging Designand Agent.	
New Registered Agent's Signature, if c I hereby accept the appointment as regist	wanging Registered Agent.  ered agent. I am familiar with and accept the obliga	tions of the position.
	rytus	
	Signature of New Registered Agent, if changi	ng
Charle if and backle		•
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)

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.

Example: X Change	<u>PT</u>	John Doe	
X Remove	$\underline{\mathbf{V}}$	Mike Jones	
X Add	<u>sv</u>	Sally Smith	
Type of Action (Check One)	<u>Title</u>	<u>Name</u>	Address
1) Change	P	Maldonado Sanchez, Carlos	7646 Trenton Dr
Add			Lake Worth, FL 33467
X Remove			
2) Change	P	Angel Eduardo Maldonado	7646 Trenton Dr
X Add			Lake Worth, FL 33467
Remove 3) Change			
Add			
Remove			
4) Change		_	_
Add			
Remove			
51 Change			
Add			
Remove			
6) Change			
Add			
Remove			

<u>If am</u> (Attac	nding or adding additional Articles, enter change(s) here: additional sheets, if necessary). (Be specific)
/A	The opening of the control of the co
	· ·
	· · · · <del>-</del> · · · · <del>-</del>
	<u></u>
<u>If an</u>	mendment provides for an exchange, reclassification, or cancellation of issued shares, sions for implementing the amendment if not contained in the amendment itself:
prov	f not applicable, indicate N/A)
A	
	<del></del>
· <u> </u>	

The date of each amendment(s) date this document was signed.	adoption:	, if other than the
Effective date <u>if applicable</u> :		
	(no more than 90 days after amend	lment file date)
Note: If the date inserted in this document's effective date on the E		ng requirements, this date will not be listed as the
Adoption of Amendment(s)	(CHECK ONE)	
☐ The amendment(s) was/were action was not required.	dopted by the incorporators, or board of directors	without shareholder action and shareholder
■ The amendment(s) was/were ad by the shareholders was/were	dopted by the shareholders. The number of votes sufficient for approval.	cast for the amendment(s)
	oproved by the shareholders through voting group reach voting group entitled to vote separately on	
"The number of votes cas	t for the amendment(s) was/were sufficient for ap	proval
by		
	(voting group)	
select	director president or other officer – if directors or ed, by an incorporator – if in the hands of a receive the diductor of the hands of a receive the hands of the hands of a receive the hands of t	er, trustee, or other court
	President	
	(Title of person signing)	