P1700048101

(Requestor's Name)
(Address)
, .
(A.L.)
(Address)
(City/State/Zip/Phone #)
PICK-UP WAIT MAIL
(Business Entity Name)
(Dusiness Chury Warne)
(Document Number)
Certified Copies Certificates of Status
<u></u>
Special Instructions to Filing Officer:

Office Use Only



300317583753

08/80/18--01021--018 **5S.00

FILED
2018 AUG 30 AM 10: 17
SECRETARY OF STAT

C. GOLDEN SEP - 5 2018

COVER LETTER

	of Corporations			
SUBJECT:	DE LA RUA INVESTMENT I			
	Name	of Corporation	on	
DOCUMENT N	NUMBER:			
The enclosed Ar	mendment and fee are subm	itted for fili	ng.	
Please return all	correspondence concerning	this matter	to the following:	
MARIOLY MUNO)Z			
	Name of Contact Person			
	Firm/Company			
2760 SW 97 AVE	STE B 101			
	Address			
MIAMI ,F L 33165	5			
	City/State and Zip Code			
MKMUNOZ2018@	@GMAIL.COM			
E-mail addre	ess: (to be used for future annu	ual report not	tification)	
For further infor	rmation concerning this mat	ter, please c	all:	
MARIOLY MUN (oz	786	327-3708	
Name o	of Contact Person	Area C	ode & Daytime Telep	hone Number
Enclosed is a ch	eck for the following amou	nt:		
\$35.00 Filing	Fee \$43.75 Filing Fee & Certificate of Statu	s 🗀 (543.75 Filing Fee & Certified Copy Additional copy is enclosed)	\$52.50 Filing Fee, Certificate of Status & Certified Copy (Additional copy is enclosed)
Mailing Address Amendment Sec Division of Corp P.O. Box 6327 Tallahassec, FL	ction porations	Clifton Bu	nt Section of Corporations	

Tallahassee, FL 32301

Articles of Amendment to Articles of Incorporation of

FILED

2018 AUG 30 AM 10: 12

DE LA RUA INVESTMENT INC

(Name of Corporation as currently filed with the Florida Dept. of State FUNE TARY OF STATE TALLAHASSEF FILE (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 <u>MUST BE A STREET ADDRESS</u>) 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: MARIOLY MUNOZ Name of New Registered Agent 2760 SW 97 AVE STE B101 (Florida street address) , Florida 33165 MIAMI New Registered Office Address: (City) New Registered Agent's Signature, if changing Registered Agent: Thereby 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 Officer's 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	<u>V</u>	Mike Jones	
X Add	<u>sv</u>	Sally Smith	
Type of Action (Check One)	Title	<u>Name</u>	<u>Addres</u> s
1) Change	P	ANGEL DE LA RUA	2760 SW 97 AVE STE B 101
Add			STE B 101
X Remove			MIAMI FL 33165
2) Change			
Add			
Remove			
3) Change			
Add			
Remove			
4) Change			
Ađd			
Remove			
5) Change			
Add			
Remove			
6) Change			
Add			
Remove			

Attach additional sheets, if necessary).	(Be specific)	
		
		
		-
	<u> </u>	_
·		-
f an amendment provides for an excl	hange, reclassification, or cancellation of issued shares,	
provisions for implementing the ame	ndment if not contained in the amendment itself:	
(if not applicable, indicate N/A)		
		 -

	06/20/2018	
The date of each amendment(s) a date this document was signed.	doption:	, if other than the
	20/2018	
Effective date <u>if applicable</u> :	(no more than 90 days after amendment file date)	
Note: If the date inserted in this document's effective date on the D	block does not meet the applicable statutory filing requirements, this epartment of State's records.	date will not be listed as the
Adoption of Amendment(s)	(<u>CHECK ONE</u>)	
The amendment(s) was/were ac by the shareholders was/were s	opted by the shareholders. The number of votes cast for the amendme ufficient for approval.	u(s)
	proved by the shareholders through voting groups. The following state reach voting group entitled to vote separately on the amendment(s):	ement
"The number of votes cas	t for the amendment(s) was/were sufficient for approval	
100 by	(voting group)	
	(voting group)	
	opted by the board of directors without shareholder action and shareho	lder
☐ The amendment(s) was/were ac action was not required.	iopted by the incorporators without shareholder action and shareholder	
06/20/20		
Signature		
(By a select	director, president or other officer – if directors or officers have not be ed, by an incorporator – if in the hands of a receiver, trustee, or other conted fiduciary by that fiduciary)	
	MARIOLY MUNOZ	
	(Typed or printed name of person signing)	
	PRESIDENT	
	(Title of person signing)	