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COVER LETTER

TO: Amendment Section Division of Corporations

NAME OF CORPORATION	FHARO ANGEL	INVESTMENTS CORP	
DOCUMENT NUMBER:	P17000		
The enclosed Articles of Amer	ndment and fee are su	bmitted for filing.	
Please return all correspondence	ce concerning this ma	tter to the following:	
		ADRIANA LANCHER	os
	- 184 SIMI	Name of Contact Person	1
		Firm/ Company	
		7701 NW 15TH ST. CO28	36943
		Address	
	······································	MIAMI, FL 33106	<u> </u>
		City/ State and Zip Code	e
		alancheros@yahoo.com	:/
E-1	mail address: (to be u	sed for future annual report	notification)
For further information concer	ming this matter, pleas	se call:	
ADRIANA LANCHEROS		at (8482584
Name of Conta	ect Person	Area Co	de & Daytime Telephone Number
Enclosed is a check for the fol	lowing amount made	payable to the Florida Depa	artment of State:
	843.75 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 Ad Amendment Division of P.O. Box 63 Tallahassee,	Section Corporations 27	Amend Divisio Clifton	Address Iment Section on of Corporations Building Executive Center Circle

Tallahassee, FL 32301

Articles of Amendment Articles of Incorporation of

FHARO ANGEL INVESTMENTS CORP

(Name of Corporation as currently filed with the Florida Dept. of State) P17000068568 (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: N/Λ 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: N/A (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: (City) 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 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 Smath 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 Doc	
X Remove	<u>V</u>	Mike Jones	
X Add	<u>SV</u>	Sally Smith	
Type of Action (Check One)	<u>Title</u>	<u>Name</u>	Address
1) Change	P	MIRIAM ALICE HERZ	7701 NW 15TH ST. CO286943
Add			MIAMLEL 33106
X Remove			
2) Change	P	LAYDA BOHORQUEZ	7701 NW 15TH ST, CO286943
X Add			MIAMI.FL 33106
Remove			
3) Change			
Add			
Remove			
4) Change			
Add			
Remove			
5) Change			
Add			
Remove			
б) Change			
Add			
Remove		1/	



. <u>If ame</u> (Attacl	nding or adding additional Articles, enter change(s) here: additional sheets, if necessary). (Be specific)
//A	The second of th
If an a	mendment provides for an exchange, reclassification, or cancellation of issued shares,
<u>prov</u>	sions for implementing the amendment if not contained in the amendment itself: if not applicable, indicate N(4)
9/A	



The date of each amendment(s) a	N/A adoption:	if other than th
date this document was signed.	•	
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 date we partment of State's records.	ill not be listed as th
Adoption of Amendment(s)	(CHECK ONE)	
■ The amendment(s) was/were ad by the shareholders was/were s	lopted by the shareholders. The number of votes east for the amendment(s) sufficient for approval.	
	proved by the shareholders through voting groups. The following statement reach voting group entitled to vote separately on the amendment(s):	
	t for the amendment(s) was/were sufficient for approval	
by N/A	tvoting group)	
	(voting group)	
☐ The amendment(s) was/were ad action was not required.	lopted by the board of directors without shareholder action and shareholder	
☐ The amendment(s) was/were ad- action was not required.	lopted by the incorporators without shareholder action and shareholder	
DECEM Dated	BER 20,2017/	
174100	MIONIA C	
Signature	Muy	
(By a constant)	director, president or other officer – if directors or officers have not been ed, by an incorporator – if in the hands of a receiver, trustee, or other court	
арроів	nted fiduciary by that if duciary)	
	/ MIRIAM ALICE DERZ	
	(Typed or printed name of person signing)	
	PRESIDENT	
	(Title of person signing)	

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