## P15000034633

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## COVER LETTER

TO: Amendment Section Division of Corporations

NAME OF CORPOR	ATION: UBakeIt Internation	onal, Corp	
DOCUMENT NUMB			
The enclosed Articles (	of Amendment and fee are st	ibmitted for filing.	
Please return all corres	pondence concerning this ma	tter to the following:	
	Nayarit Briceno		
-	<del> </del>	Name of Contact Person	11
	BW&T Business Advisers, I	nc	
		Firm/ Company	
	3600 Red Road Suite 301		
•	<u></u>	Address	
	Miramar, FL. 33025		
		City/ State and Zip Cod	t'
admin	@accountingbwtba.com		
	•	sed for future annual report	notification)
	·		
For further information	concerning this matter, plea	se call:	
Nayarit Briceno		954 at (	443-1594
Name o	f Contact Person	Area Code & Daytime Telephone N	
Enclosed is a check for	the following amount made	payable to the Florida Depa	artment of State:
S35 Filing Fee	□\$43.75 Filing Fee & Certificate of Status	□\$43.75 Filing Fee & Certified Copy (Additional copy is enclosed)	☐\$52.50 Filing Fee Certificate of Status Certified Copy (Additional Copy is enclosed)
Ame Divis P.O.	ing Address indment Section sion of Corporations Box 6327 hassee, FL 32314	Amenc Divisio Clifton	Address Iment Section on of Corporations Building Executive Center Circle

Tallahassee, FL 32301

## Articles of Amendment to Articles of Incorporation of

UBakeIt Internation	al.	Corp
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	<u></u>
( <u>Name of Corporation as c</u>	urrently filed with the Florida Dept. of State)
P18000034633	
(Document Nu	imber of Corporation (if known)
Pursuant to the provisions of section 607.1006, Florida Statutits Articles of Incorporation:	tes, this Florida Profit Corporation adopts the following amendment(s) to
A. If amending name, enter the new name of the corporat	tion <u>:</u>
	The
name must be distinguishable and contain the word "corp." "Inc.," or Co.," or the designation "Corp," "Inc word "chartered," "professional association," or the abbrev	poration," "company," or "incorporated" or the abbreviation  z," or "Co". A professional corporation name must contain the  iation "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)	ZOIS MAY 29 PRINCE TARE ANASSEE F
D. If amending the registered agent and/or registered offinew registered agent and/or the new registered office a	
Name of New Registered Agent	
	'orida street address)
tru	orida street address)
New Registered Office Address:	Florida
	(City) (Zip Code)
New Registered Agent's Signature, if changing Registered I hereby accept the appointment as registered agent. I am fa	
Signature q	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 = 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.

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)	<u>Title</u>	<u>Name</u>	Address
1) Change	T	Monica Fuentes Casado	4044 NE 7th Ave Suite 201
Add			Fort Lauderdale, FL, 33334
X Remove			
2) Change	T	Federico Fuentes Madriz	3640 Yacht Club Dr. Apt 410
XAdd			Aventura, FL. 33180
Remove			
3) $\frac{X}{}$ Change	S	Marianella Fuentes Casado	4044 NE 7th Ave Suite 201
Add		-	Fort Lauderdale, FL.33334
Remove			
4) Change			
Add			
Remove			
5) Change			
Add			
Remove			
6) Change			
Add			
Remove			

Attach additional sheets, if necessary).	(Be specific)			
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				<del></del>
f an amendment provides for an excl	anga radassification ar	- nanaallation of iccu	ad charac	
provisions for implementing the ame				
(if not applicable, indicate N/A)			<del></del>	
	<del></del>			
	<del></del>			
			.,,.	

The date of each amendment(s)	adoption:	, if other than the
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 thi document's effective date on the	s block does not meet the applicable statutory filing requirements, this do Department of State's records.	ate will not be listed as the
Adoption of Amendment(s)	(CHECK ONE)	
The amendment(s) was/were by the shareholders was/were	adopted by the shareholders. The number of votes cast for the amendment( sufficient for approval.	s)
☐ The amendment(s) was/were must be separately provided	approved by the shareholders through voting groups. The following statem for each voting group entitled to vote separately on the amendment(s):	ent
"The number of votes c	ast for the amendment(s) was/were sufficient for approval	
by	(voting group)	
• = -:-	(voting group)	
☐ The amendment(s) was/were action was not required.	adopted by the board of directors without shareholder action and sharehold	er
☐ The amendment(s) was/were action was not required.	adopted by the incorporators without shareholder action and shareholder	
Dated04	1/27/18	
Signature( <b>Ý</b> )	CHAALII AHILII EU	
(By	a director, president or other officer - if directors or officers have not been	
	ected, by an incorporator – if in the hands of a receiver, trustee, or other coulointed fiduciary by that fiduciary)	गर
	Gladys Casado de Fuentes	
	(Typed or printed name of person signing)	<del> </del>
	President	
	(Title of person signing)	