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COVER LETTER

TO: Amendment Section Division of Corporations

Tallahassee, FL 32314

NAME OF CORPORATION:	ANIMA BELLA, CORP				
DOCUMENT NUMBER:	P18000055592				
The enclosed Articles of Amendme	t and fee are submitted for filing.				
Please return all correspondence co	cerning this matter to the following:				
	MARIA V. MARCHETTI				
•	Name of Contact Person				
	ANIMA BELLA, CORP				
	Firm/ Company				
	9250 W. BAY HARBOR DR APT 7-D				
	Address				
	BAY HARBOR ISLANDS, FL 33154				
- 	City/ State and Zip Code				
	druiztaxservice@hotmail.com				
E-mail	dress: (to be used for future annual report notification)				
	•				
For further information concerning	is matter, please call:				
MARIA V. MARCHETTI	at (954 305 5111				
Name of Contact Pe					
Enclosed is a check for the following	amount made payable to the Florida Department of State:				
	Filing Fee & S43.75 Filing Fee & S52.50 Filing Fee ate of Status Certified Copy (Additional copy is enclosed) Certified Copy (Additional Copy is enclosed)				
Mailing Address Amendment Sect Division of Corpo					

2415 N. Monroe Street, Suite 810

Tallahassee, FL 32303

Articles of Amendment to Articles of Incorporation of

ANIMA BELLA CORP

	ANIMA BELLA	V. CORP		
(Name	e of Corporation as curren	tly filed with the Florida Dept. of State)		
	P180000555			
	(Document Number	of Corporation (if known)		
Pursuant to the provisions of section 60 its Articles of Incorporation:	7.1006, Florida Statutes, this	s Florida Profit Corporation adopts the follo	owing amendment(s	
A. If amending name, enter the new	name of the corporation:			
NCORSA AMERICA, CORP.				
name must be distinguishable and conta "Inc.," or Co.," or the designation "chartered," "professional association,	Corn Inc or "Co"	'company," or "incorporated" or the abbres A professional corporation name must co	The new iation "Corp.," ntain the word	
3. Enter new principal office address Principal office address <u>MUST BE A.</u>	<u>, if applicable:</u> STREET ADDRESS)			
			702	
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)		1629 NE 163rd STREET	702) AUG 1	
		NORTH MIAMI BEACH. FL 33162		
			 : :	
). If amending the registered agent an new registered agent and/or the ne	nd/or registered office add w registered office address	ress in Florida, enter the name of the	2:09	
Name of New Registered Agent				
	_			
		eet address)		
New Registered Office Address:	1629 NE 163rd STREET, NORTH MIAMI BEACH Florida 33162			
		(City) (Z	ip Code)	
ew Registered Agent's Signature, if chereby accept the appointment as regist	hanging Registered Agent: ered agent. I am familiar w	: with and accept the obligations of the position	n.	
	Que VIII	\ .		
 -	Signature of New Re	rgistered Agent, if changing		
heck 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 Doc 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 Doc, 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>	<u>Addres</u> s
l) Change	V/P	TABORDA, SERGIO G.	1629 NE 163rd STREET
X Add			North Miami Beach, FL 33162
Remove			ASTAPLIA S
2) Change			-
Add			
Remove 3) Change	**		
Add			
Remove			
4) Change			
Add			
Remove			
5) Change			
Add			
Remove		•	
6) Change			
Add			
Remove			

касп апиппонить	ding additional Articles heets, if necessary).— (B	le specific)	_		
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ın amendment p	rovides for an exchange	e, reclassification, or	cancellation of issu	ed shares.	
<u>ovisions for imp</u>	lementing the amendm	ent if not contained	in the amendment it	self:	
(if not applicat	ole, indicate N/A)				
-			· · · · · · · · · · · · · · · · · · ·		
					
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				<u>.</u>	

•	07/31/2020	
The date of each amend	4/3 1	16 A A A
date this document was si	oned	, if other than th
um document was si	-	
Effective date <u>if applica</u>	07/31/2020	
Effective date if applica		
	(no more than 90 days after a	imendment file date)
Note: If the date inserted document's effective date	I in this block does not meet the applicable statutor on the Department of State's records.	y filing requirements, this date will not be listed as th
Adoption of Amendmen	(S) (CHECK ONE)	
The amendment(s) was action was not required	/were adopted by the incorporators, or board of direct.	ctors without shareholder action and shareholder
☐ The amendment(s) was by the shareholders was	/were adopted by the shareholders. The number of vs/were sufficient for approval.	otes east for the amendment(s)
must be separately pro	/were approved by the shareholders through voting g vided for each voting group entitled to vote separate otes east for the amendment(s) was/were sufficient for	ly on the amendment(s):
by		
	(voting group)	
Dated	07/31/2020	
Signatur	dit	<u>h</u> .
	(By a director, president or other officer – if directo selected, by an incorporator – if in the hands of a reappointed fiduciary by that fiduciary)	ors or officers have not been eceiver, trustee, or other court
	MARIA V. MARCE	HETTI
	(Typed or printed name of person	n signing)
	PRESIDENT	
	(Title of person signing)	