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COVER LETTER

		COVER LETTER		
TO: Amendment Sect Division of Corp				19 OCT 28 MILLION
NAME OF CORPO	RATION: WHAT A PARTY	!!, INC.		20 Call Co.
	BER:			3 M
	of Amendment and fee are su			. 18 CH
	spondence concerning this ma			
	LUZ CALDERON GRANA	DOS		
		Name of Contact Person	n	
	969 TRAMELLS TRI.	Firm Company	,	
		Address		
	KISSHMMEE , FL 34744			
		City/ State and Zip Cod		
NAS	LYCALDERON@GMAIL.C	OM		
•	E-mail address: (to be u	sed for future annual report	notification)	
For further informatio	on concerning this matter, plea	se call;		
NASLY CALDERON	×	407	5775736	
Name	of Contact Person	Area Co	de & Daytime Telephone Number	-
linclosed is a check (c	or the following amount made	payable to the Florida Depa	artment of State:	
☐ \$35 Filing Fee		□\$43.75 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, F1, 32314		Ameno Divisio Cliftor 2661 I	Address Iment Section on of Corporations i Building Executive Center Circle assee, FL 32301	

Articles of Amendment Articles of Incorporation οf

SOCT SO MAINTENANT OF THE PARTY WHAT A PARTY!!. INC. (Name of Corporation as currently filed with the Florida Dept. of State) P18000058901 (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: 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: 2511 WINDING RIDGE AVE. NORTH (Mailing address MAY BE A POST OFFICE BOX) KISSIMMIE, FL 34741 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 1502 N SEMORAN BLVD UNIT 106 (Florida street address) ORLANDO, FL New Registered Office Address: (Cin) 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 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

 $P \neq President; V \neq Vice President; T \neq Treasurer; S \neq Secretary; D \neq Director; TR \Rightarrow Trustee; C \Rightarrow Chairman or Clerk; CEO \Rightarrow Chief Financial Officer. If an officer/director holds more than one title, list the first letter of each office held. President, Treasurer, Director would be PTD.$

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	PT Joh	<u>n Doe</u>	
X Remove	<u>V</u> <u>M</u> i <u>l</u>	te Jones	
X Add	<u>SV</u> <u>Sall</u>	l <u>y Smith</u>	
Type of Action (Check One)	Title	<u>Name</u>	<u>Addres</u> s
1) Change	P	MARITZA D CARRERA RUBIO	12001 RESEARCH PKWY
Add			#236
X Remove			ORLANDO, FL 32826
2) Longe Change	<u> </u>		
Add			
Remove			
3.1 Change		~ 	
Add			
Remove			
4) Change			
Add			
Remove			
5) Change			
Add			
Remove			
6) Change			
Add			
Remove			

E. <u>If amending or adding additional Articles, enter change(s) here:</u> (Attach additional sheets, if necessary). (Be specific) Maritza D Carrera give to Luz N Calderon 100 % of the Stocks in the What a Party Company!!, Inc. and transfer					
F. If an amendment provides for an exchange, reclassification, or cancellation of issued shares,					
provisions for implementing the amendment if not contained in the amendment itself: (if not applicable, indicate N/A)					

The date of each amendment(s) adoption:	, if other than the
date this document was signed.	
Effective date if applicable:	
(no more than 90 days after amendment file date)	
Note: If the date inserted in this block does not meet the applicable statutory filing requirements, this document's effective date on the Department of State's records.	date will not be listed as the
Adoption of Amendment(s) (CHECK ONE)	
☐ The amendment(s) was/were adopted by the shareholders. The number of votes east for the amendment by the shareholders was/were sufficient for approval.	nt(s)
☐ The amendment(s) was/were approved by the shareholders through voting groups. The following state must be separately provided for each voting group entitled to vote separately on the amendment(s):	ment
"The number of votes east for the amendment(s) was/were sufficient for approval	
by	
(voting group)	
☐ The amendment(s) was/were adopted by the board of directors without shareholder action and shareholder action was not required.	lder
The amendment(s) was/were adopted by the incorporators without shareholder action and shareholder action was not required.	
Dated 10 · 21 - 19	
Signature Signature	
Signature (By a director, president or other officer – if directors or officers have not be selected, by an incorporator – if in the hands of a receiver, trustee, or other e appointed fiduciary by that fiduciary)	
Luz Nasly Calderon Gran (Typed or printed name of person signing)	ados
VP	
(Title of person signing)	