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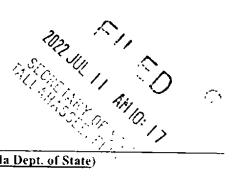
COVER LETTER

TO: Amendment Section Division of Corporations

NAME OF CORPOR	RATION: AIM INVERSION	NES DE CONTADO 728, C	ORP	
DOCUMENT NUME	BER:			
	of Amendment and fee are su			
Please return all corres	pondence concerning this ma	atter to the following:		
	ALEXANDRA LOZANO		, 1	
		Name of Contact Person	1	
		Firm/ Company		
	8305 W ATLANTIC BLVD		<u> </u>	
CORAL SPRINGS, FL 3307		Address		
•		City/ State and Zip Code		
	maxi8317@aol.com			
•	E-mail address: (to be us	sed for future annual report	notification)	
For further information	concerning this matter, plea	se call:		
ALEXANDRA LOZA	NO	at (224-2348	
Name of Contact Person		Area Coc	le & Daytime Telephone Number	
Enclosed is a check for	the following amount made	payable to the Florida Depa	rtment of State:	
S35 Filing Fee	☐\$43.75 Filing Fee & Certificate of Status	S43.75 Filing Fee & Certified Copy (Additional copy is enclosed)	S52.50 Filing Fee Certificate of Status Certified Copy (Additional Copy is enclosed)	
Mailing Address Amendment Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314		Street Address Amendment Section Division of Corporations The Centre of Tallahassee 2415 N. Monroe Street, Suite 810		

Tallahassee, FL 32303

Articles of Amendment to Articles of Incorporation of



AIM INVERSIONES DE CONTADO 728, CORP

annonalis Electrical at the	· · · · · · · · · · · · · · · · · · ·	
arrently thea with the Flo	rida Dept. of State)	
mber of Corporation (if kno		
es, this <i>Florida Profit Corp</i>	oration adopts the followi	ng amendment(s
ion:		
		The new
on," "company," or "incor 50". A professional corp "P.A."	porated" or the abbreviat oration name must conta	ion "Corp.," in the word
)		_
		
		
		_
<u>ce address in Florida, ente</u> ddress:	r the name of the	
		-
rida street address:		_
The street desires as		
(Citv)	Florida	Code
ren,,,	(Zip	Code)
Agent:		
ultar with and accept the o	bligations of the position.	
New Registered Agent, if ch	nanging	_
) (11) (e), F.S.		
	e address in Florida, enteddress: (City) Agent: with and accept the original with a coefficient or the original with a coefficient original with a coe	e address in Florida, enter the name of the idress:

If amending the Officers and/or Directors, enter the title and name of each officer/director being removed and title, name, at 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	$\underline{\mathbf{V}}$	Mike Jones	
X Add	<u>sv</u>	Sally Smith	
Type of Action (Check One)	<u>Title</u>	<u>Name</u>	<u>Addres</u> s
1) Change	V	HERNANDEZ, VLADIMIR G	100 BAYVIEW DR. APT 1030
Add			SUNNY ISLES BEACH
X Remove			FL 33160
2) Change			
Add			
Remove 3) Change			
Add			
Remove			
4) Change		_	
Add Remove			
5) Change			
Add			
Remove			
6) Change			
Add			
Remove			

Attach <i>additional s</i>	ding additional Artic heets, if necessary).	(Be specific)	<u></u>		
	•	. , , , -,			
				<u> </u>	
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_					
					
an amendment p	rovides for an excha	nge, reclassifica	tion, or cancellat	ion of issued sha	res.
or oversions for imp	iementing the amen	<u>dment if not con</u>	tained in the am	endment itself:	
(ij avi uppneai	ble, indicate N/A)				
<u> </u>					
					
		·- -			
				<u> </u>	
					

The date of each amendment(s) adoption: _date this document was signed.	, if other than the
-	
Effective date if applicable:	(no more than 90 days after amendment file date)
	(no more than 90 days after amendment file date)
Note: If the date inserted in this block does document's effective date on the Department of	ot meet the applicable statutory filing requirements, this date will not be listed as the State's records.
Adoption of Amendment(s)	IECK ONE)
The amendment(s) was/were adopted by th action was not required.	incorporators, or board of directors without shareholder action and shareholder
☐ The amendment(s) was/were adopted by the by the shareholders was/were sufficient for	shareholders. The number of votes cast for the amendment(s) approval.
☐ The amendment(s) was/were approved by to must be separately provided for each voting	e shareholders through voting groups. The following statement group entitled to vote separately on the amendment(s):
"The number of votes cast for the am	ndment(s) was/were sufficient for approval
by	
(ve	ing group)
Dated July 05	.2022 .
Signature Hect	r R. Astudillo.
(By a director, pre	ident or other officer – if directors or officers have not been
selected, by an in-	orporator - if in the hands of a receiver, trustee, or other court
appointed fiducia	by that fiduciary)
HECTOR	RASTUDILLO
	Typed or printed name of person signing)
PRESIDE	T
	Title of person signing)