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# P18000070947

| (Red                      | questor's Name)     |          |  |  |
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| PICK-UP                   | ☐ WAIT              | MAIL     |  |  |
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| Certified Capies          | Certificates of     | f Status |  |  |
| Special Instructions to F | Filing Officer.     |          |  |  |
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|                           |                     |          |  |  |

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## **COVER LETTER**

TO: Amendment Section Division of Corporations

| NAME OF CORPORATIO   | MARLEN                                      | E MARKETING GROUP.   | INC   |  |  |
|--|---|--|---|--|--|
| DOCUMENT NUMBER: _   |   | P18000070947   | 70947   |  |  |
| The enclosed Articles of Am  | endment and fee are su                      | bmitted for filing.  |   |  |  |
| Please return all corresponde  | nee concerning this ma                      | tter to the following:   |   |  |  |
|  | i   | BENJAMIN ALEJANDRO   | )   |  |  |
|  |   | Name of Contact Persor   | 1   |  |  |
|  |   | SEGUROS USA, CORP.   |   |  |  |
|  |   | Firm/ Company  |   |  |  |
|  | ŀ   | 4750 SW 26TH ST, SUITE   | 203   |  |  |
|  | <del></del>                                 | Address  |   |  |  |
|  |   | MIAMI, FL 33185  |   |  |  |
|  |   | City/ State and Zip Code   | e   |  |  |
|  |   | jadir@hispaniefactor.org   |   |  |  |
|  | -mail address: (to be us                    | sed for future annual report                                     | notification)   |  |  |
| For further information conc<br>BENJAMIN A                               |   | 305  | 610 1479  |  |  |
| Name of Contact Person   |   | at (at Co  | )<br>de & Daytime Telephone Number  |  |  |
| Enclosed is a check for the fo   | ollowing amount made                        | payable to the Florida Depa                                      | artment 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 |   | Amend<br>Divisio<br>The C  | Address Iment Section on of Corporations entre of Tallahassee                         |  |  |
| Taltahassee, FL 32314  |   | 2415 î   | N. Monroe Street, Suite 810   |  |  |

Tallahassee, FL 32303

#### Articles of Amendment to Articles of Incorporation of

### MARLENE MARKETING GROUP, INC.

| (Name of Corporation as cur   | rrently filed with th                 | e Florida Dept. of S                        | (ate)                      |                |
|---|---------------------------------------|---|----------------------------|----------------|
| P180000   | 070947                                |   |                            |                |
| (Document Num   | iber of Corporation (                 | if known)                                   | · <u> </u>                 |                |
| Pursuant to the provisions of section 607.1006, Florida Statutes its Articles of Incorporation:   | , this <i>Florida Profit</i>          | Corporation adopts t                        | he followin                | ig amendment(s |
| A. If amending name, enter the new name of the corporation  | on:                                   |   |                            |                |
| SEGUROS US  | SA, CORP.                             |   |                            | The new        |
| name must be distinguishable and contain the word "corporation" Inc.," or Co.," or the designation "Corp.," "Inc.," or "Co" chartered, ""professional association," or the abbreviation | o". A professional                    | 'incorporated" or the<br>corporation name n | abbreviatio<br>nust contai | m "Corp.,"     |
| B. Enter new principal office address, if applicable: (Principal office address <u>MUST BE A STREET ADDRESS</u> )   |                                       |   |                            |                |
|   |                                       |   | 3.                         | t<br>!         |
|   |                                       |   |                            | (              |
| 2. Enter new mailing address, if applicable:<br>(Mailing address MAY BE A POST OFFICE BOX)  |                                       |   | -<br>-, _                  | <u>-</u>       |
| · · · · · · · · · · · · · · · · · · ·   |                                       |   | <i>(</i>                   | 2              |
|   |                                       |   |                            | <del></del>    |
|   |                                       |   | =                          | <u> </u>       |
| ). If amending the registered agent and/or registered office  |                                       | , enter the name of t                       | <u>he</u>                  | С              |
| new registered agent and/or the new registered office ad  | dress:                                |   |                            |                |
| Name of New Registered Agent  | · · · · · · · · · · · · · · · · · · · |   |                            | _              |
| (Flori  | ida street address)                   |   |                            | _              |
| New Registered Office Address:  | ·····                                 | . Flori                                     | do                         |                |
| New Registerea Office Address.  | (City)                                |   |                            | Code)          |
|   |                                       |   |                            |                |
| Sew Registered Agent's Signature, if changing Registered A hereby accept the appointment as registered agent. I am fam  | Agent:<br>iliar with and accept       | t the obligations of th                     | e position.                |                |
|   |                                       |   |                            | -              |
| Signature of N  | Vew Registered Agen                   | t, if changing                              |                            |                |
| Check 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)

Example:

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                      | PT           | <u>John Do</u> | <u>e</u> |         |
|-------------------------------|--------------|----------------|----------|---------|
| X Remove                      | <u>V</u>     | Mike Jo        | nes      |         |
| X Add                         | <u>\$Y</u>   | Sally Sn       | uith     |         |
| Type of Action<br>(Check One) | <u>Title</u> |                | Name     | Address |
| 1) Change                     |              | _              |          |         |
| Add                           |              |                |          |         |
| Remove                        |              |                |          |         |
| 2) Change                     |              | _              |          |         |
| Add                           |              |                |          |         |
| Remove 3) Change              |              | _              |          |         |
| Add                           |              |                |          |         |
| Remove                        |              |                |          |         |
| 4) Change                     |              | <b>-</b> -     |          |         |
| Add                           |              |                |          |         |
| Remove                        |              |                |          |         |
| 5) Change                     |              | _              |          |         |
| Add                           |              |                |          |         |
| Remove                        |              |                |          |         |
| 6) Change                     |              | _              |          |         |
| Add                           |              | _              |          |         |
| Remove                        |              |                |          |         |

| Attach additional sheets, if necessary).                                  | cles, enter change(s) here:  (Be specific)                |
|---|---|
|   | (at spring)   |
| N.  |   |
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| f an amendment provides for an exch                                       | ange, reclassification, or cancellation of issued shares, |
|   | ndment if not contained in the amendment itself:          |
| provisions for implementing the amer                                      |   |
| (if not applicable, indicate N/A)   |   |
| provisions for implementing the amer<br>(if not applicable, indicate N/A) |   |
| (if not applicable, indicate N/A)   |   |
| (if not applicable, indicate N/A)   |   |
| (if not applicable, indicate N/A)   |   |

•

|  | 10/10/2024   |                           |
|--|--|---------------------------|
| The date of each amendment(s) ac   | loption:   | , if other than the       |
| date this document was signed.   |  |                           |
|  | 10/10/2024   |                           |
| Effective date <u>if applicable</u> :  | · · · · · · · · · · · · · · · · · · ·  |                           |
|  | (no more than 90 days after amendment file date)   |                           |
| Note: If the date inserted in this bl<br>document's effective date on the De | lock does not meet the applicable statutory filing requirements, this date partment of State's records.  | will not be listed as the |
| Adoption of Amendment(s)   | ( <u>CHECK ONE</u> )   |                           |
| ■ The amendment(s) was/were ado action was not required.                     | pted by the incorporators, or board of directors without shareholder action  | and shareholder           |
| ☐ The amendment(s) was/were ado<br>by the shareholders was/were su           | pted by the shareholders. The number of votes cast for the amendment(s) fficient for approval.   |                           |
|  | roved by the shareholders through voting groups. The following statement each voting group entitled to vote separately on the amendment(s):  | t .                       |
| "The number of votes cast  | for the amendment(s) was/were sufficient for approval  |                           |
| by   | •  |                           |
|  |  |                           |
|  |  |                           |
| Dated  | 110/2024   |                           |
| Signature  | The state of the s |                           |
| (By a di   | rector, president or other officer - if directors or officers have not been  | <del></del>               |
| selected   | I, by an incorporator – if in the hands of a receiver, trustee, or other court ed fiduciary by that fiduciary)   |                           |
|  | BENJAMIN ALEJANDRO   |                           |
| •  | (Typed or printed name of person signing)  |                           |
|  | PRESIDENT  |                           |
|  |  |                           |

(Title of person signing)