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COVER LETTER

TO: Amendment Section Division of Corporations

NAME OF CORPOR	RATION: EL SABROSO CO	ORP				
DOCUMENT NUM	BER: P18000072820					
The enclosed Articles	of Amendment and fee are so	abmitted for filing.				
Please return all corres	spondence concerning this ma	atter to the following:				
	VICTOR LOPEZ CUELLAR					
	Name of Contact Person					
	EL SABROSO CORP					
		Firm/ Company				
	10664 ROYAL PALM BLVD APT # 64					
	Address					
	CORAL SPRINGS , FL 33065					
		City/ State and Zip Cod	<u> </u>			
		•				
INFO	@TAXACCOUNTLLC.CO					
	E-mail address; (to be u	sed for future annual report	notification)			
For further information	n concerning this matter, plea	se call:				
VICTOR LOPEZ CUE	ELLAR	954 at (464-6098			
Name of Contact Person		Area Co	ode & Daytime Telephone Number			
Enclosed is a check for	the following amount made	payable to the Florida Dep	artment of State:			
S35 Filing Fee	□S43.75 Filing Fee & Certificate of Status	□\$43.75 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 Clifton Building 2661 Executive Center Circle Tallahassee, FL 32301				

Articles of Amendment to Articles of Incorporation οf

FILED .

EL SABROSO CORP

(Name of Corporation as currently filed with the Florida Depf of State) P18000072820 (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 <u>MUST BE A_STREET ADDRESS</u>) C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX) 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 (Florida street address) New Registered Office Address: (City) (Zip Code) New Registered Agent's Signature, if changing Registered Agent: I hereby 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 = 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: \underline{X} Change	<u>PT</u>	John De	<u>oc</u>	
X Remove	<u>V</u>	Mike Jones		
X Add	<u>sv</u>	Sally Smith		
Type of Action (Check One)	<u>Title</u>		Name	<u>Addres</u> s
1) Change	P		TAXACCOUNT ELC	10664 ROYAL PALM BEVD
Add				APT # 64
X Remove				CORAL SPRINGS, FL 33065
2) Change	P		VICTOR LOPEZ CUELLAR	10664 ROYAL PALM BLVD
X Add				APT # 64
Remove				CORAL SPRINGS, FL 33065
3) Change				
Add		_		
Remove				
4) Change				
Add				
Remove				11770
5) Change		_		
Add				
Remove				
6) Change		_		
Add				
Remove				

E. If amending or adding additional Articles, enter change(s) here: (Attach additional sheets, if necessary).—(Be specific)
NOTE: CHANGE THE INCORPORATOR ADDRESS : 10664 ROYAL PALM BLVD APT # 64
CORAL SPRINGS, FL 33065
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)

	ption:	, 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 blo document's effective date on the Depa	ck does not meet the applicable statutory filing requirements, this datastranent of State's records.	e will not be listed as the
Adoption of Amendment(s)	(<u>CHECK ONE</u>)	
■ The amendment(s) was/were adopt by the shareholders was/were suffi	ed by the shareholders. The number of votes east for the amendment(s cient for approval.)
	ved by the shareholders through voting groups. The following stateme ich voting group entitled to vote separately on the amendmentts):	nt
"The number of votes east fo	r the amendment(s) was/were sufficient for approval	
by	(voting group)	
	(voting group)	
The amendment(s) was/were adopt action was not required.	ed by the board of directors without shareholder action and shareholde	г
☐ The amendment(s) was/were adopt action was not required.	ed by the incorporators without shareholder action and shareholder	
08/28/2018 Dated		
Signature Vict	OR LODES	
(By a dire selected,	ctor, president or other officer – if directors or officers have not been by an incorporator – if in the hands of a receiver, trustee, or other court I fiduciary by that fiduciary)	
V	ICTOR LOPEZ CUELLAR	
-	(Typed or printed name of person signing)	
Pi	RESIDENT	
_	(Title of person signing)	