## Florida Department of State

Division of Corporations Electronic Filing Cover Sheet

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Division of Corporations

Fax Number : (850)617-6380

Account Name : LEOPOLD KORN & LEOPOLD, P.A.

Account Number : I20010000025 Phone : (786)899-2235 Fax Number : (305)935-9042

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## COR AMND/RESTATE/CORRECT OR O/D RESIGN VEN Y HAMA CORPORATION

| Certificate of Status | 0       |
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Electronic Filing Menu Corporate Filing Menu

## Articles of Amendment to Articles of Incorporation of

| Ven y Hama Corporation  |                              |   | <u> </u>           |
|---|------------------------------|---|--------------------|
| (Name o   | of Corporation as current    | ty filed with the Florida Dept. of State)   |                    |
| P1\$000074623   |                              |   |                    |
|   | (Document Number of          | of Corporation (if known)   |                    |
| Pursuant to the provisions of section 607, its Articles of Incorporation:     | 1006, Florida Statutes, this | Florida Profit Corporation adopts the following   | ng amendment(s) to |
| A. If amending name, enter the new m  | ame of the corporation:      |   | The new            |
|   | Corp," "Inc," or "Co".       | 'company," or "incorporated" or the abbreviate A professional corporation name must conta " | ion "Corp.,"       |
| B. Enter new principal office address,  |                              | 2957 NW 24th St, Rear   | SECR<br>VISIO      |
| (Principal office address MUST BE A S   |                              | Miami, FL 33142   | THE RETAR          |
|   |                              |   | 100 th             |
| C. Enter new mailing address, if appl<br>(Mailing address MAY BE A POST       |                              | 2957 NW 24th Street, Rear   | RY OF ORATIONS     |
| · •   |                              | Miami, FL 33142   | 55<br>1048         |
|   |                              |   |                    |
| D. If amending the registered agent ar<br>new registered agent and/or the new |                              |   |                    |
| Name of New Registered Agent  | Manuel Sosa                  | _   |                    |
|   | 2957 NW 24 Street, Rear      |   | <del></del>        |
|   | (Florida st                  | reet address)   |                    |
| New Registered Office Address:  | Miami                        | , Florida 33142   |                    |
|   |                              | (City) (Zip   | Code)              |
|   |                              |   |                    |
| New Registered Agent's Signature, if c  | hanging Registered Agen      | t:  |                    |
|   |                              | with and accept the obligations of the position.  |                    |
| Western St.   | 28.128.12, 247.1.1863.100)   |   |                    |
|   |                              | Registered Agent, if changing   |                    |
| Check if applicable   |                              |   |                    |

The amendment(s) is/are being filed pursuant to s. 607.0120 (11) (c), F.S.

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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                      | <u>PΓ</u> <u>John</u> | Doe          |  |
|-------------------------------|-----------------------|--------------|--|
| X Remove                      | V Mike                | : Jones      |  |
| X Add                         | SV Sally              | Smith        |  |
| Type of Action<br>(Check One) | <u>Title</u>          | <u>Name</u>  | Address                                    |
| i) X Change                   | P                     | Melissa Sosa | 2957 NW 24 Street, Rear                    |
| Add                           |                       |              | Miami, FL 33142                            |
| Remove                        |                       |              | JUST 100 HE                                |
| 2) X Change                   | VP, Sec               | Melissa Sosa | 2957 NW 24 Street, Rear Rear               |
| Add                           |                       |              | Miami, FL 33142                            |
| Remove 3) Change              |                       |              | Miami, FL 33142  PR 3: PR SIATIONS  ATTOMS |
| Ađd                           |                       |              | <b></b>                                    |
| Remove                        |                       |              |  |
| 4) Change                     |                       |              |  |
| Add                           |                       |              |  |
| Remove                        |                       |              |  |
| 5) Change                     |                       |              |  |
| Add                           |                       |              |  |
| Remove                        |                       |              |  |
| 6) Change                     |                       |              |  |
| Add                           |                       |              |  |
| Remove                        |                       |              |  |

| Attach additional sheets, if necessary). | (Be specific)  |                                       |
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|  |  |                                       |
| If an amendment provides for an evo      | hange, reclassification, or cancellation of issued shares, |                                       |
| provisions for implementing the am       | endment if not contained in the amendment itself:          |                                       |
| (if not applicable, indicate N/A)        |  |                                       |
|  |  |                                       |
| -  | · ·  |                                       |
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| The date of each amendment( date this document was signed. | s) adoption:  | , if other than the          |
|--|---|------------------------------|
| Effective date if applicable:                              | (no more than 90 days after amendment file date)  | <del></del>                  |
|  | (no more than 90 days after amendment file date)  |                              |
|  | is block does not meet the applicable statutory filing requirements, this date we Department of State's records.  | ill not be listed as the     |
| Adoption of Amendment(s)                                   | (CHECK ONE)   |                              |
| ☐ The amendment(s) was/were action was not required.       | adopted by the incorporators, or board of directors without shareholder action a  | nd shareholder               |
| ■ The amendment(s) was/were by the shareholders was/wer    | adopted by the shareholders. The number of votes east for the amendment(s) re sufficient for approval.  |                              |
|  | approved by the shareholders through voting groups. The following statement for each voting group entitled to vote separately on the amendment(s):  | ą                            |
| "The number of votes                                       | east for the amendment(s) was/were sufficient for approval  | SEC<br>IVISI<br>21           |
| by   |   | 늘 무슨                         |
|  | (voting group)  | - PAR                        |
|  |   | F 83E                        |
| July 13<br>Dated   | , 2021  | PA SEPE                      |
| Dated  | <del></del>   | 3. S.T.                      |
| Signature  | h   | STATE<br>ORATIOI<br>3: 25    |
| (By  | a director, president or other officer – if directors or officers have not been exted, by an incorporator – if in the hands of a receiver, trustee, or other court pointed fiduciary by that fiduciary) | STATE<br>ORATIONS<br>M 3: 25 |
|  | Melissa Sosa  |                              |
|  | (Typed or printed name of person signing)   |                              |
|  | President   |                              |
|  | (Title of person signing)   | <del></del>                  |