

(Requestor's Na	me)
(Address)	
(Address)	
(City/State/Zip/F	Phone #)
PICK-UP WAI	T MAIL
(Business Entity	/ Name)
(Document Nun	nber)
Certified Copies Certifi	cates of Status
Special Instructions to Filing Office	r:

Office Use Only



300321262343

12/03/18--01002--031 **35.00

DEC 0.7 2018

2018 DEC -3 AM 10: 21 SECHTIARY OF STATE SEAN TO AN ASSES, FL

COVER LETTER

TO: Amendment Section Division of Corporations

NAME OF CORPOR	ATION: ARTE ET MARTE	INC	
DOCUMENT NUMB			
	of Amendment and fee are su	bmitted for filing.	
Please return all corres	pondence concerning this ma	tter to the following:	
	OMAR VERA		
•		Name of Contact Persor	1
	ARTE ET MARTE INC		
•		Firm/ Company	
	14310 SW 8TH ST #941630		
	 -	Address	
	MIAMI FLORIDA 33194		
•		City/ State and Zip Code	2
OVER	A004@FIU.EDU		
	E-mail address: (to be us	sed for future annual report	notification)
For further information	n concerning this matter, pleas	se call:	
OMAR VERA		at ()
Name o	of Contact Person	Area Co	de & Daytime Telephone Number
Enclosed is a check for	the following amount made	payable to the Florida Depa	irtment of State:
S35 Filing Fee	□\$43.75 Filing Fee & Certificate of Status	□\$43.75 Filing Fee & Certified Copy (Additional copy is enclosed)	□\$52.50 Filing Fee Certificate of Status Certified Copy (Additional Copy is enclosed)
Ame Divi P.O.	ling Address ndment Section sion of Corporations Box 6327 shassee, FL 32314	Amend Divisio Clifton	Address ment Section on of Corporations Building xecutive Center Circle

Tallahassee, FL 32301

Articles of Amendment to Articles of Incorporation of

FILED

2018 DEC -3 AM 10: 21

ARTE ET MARTE INC

(Name of Corporation as currently filed with the Florida Dept. of State) Vi STATE P18000079055 (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: (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: _, Florida_ (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: X Change	<u>PT</u>	John Doe	
X Remove	<u>V</u>	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) X Change	P	OMAR VERA	601 SW 123RD AVE
Add			MIAMI. FL. 33184
Remove			
2) Change	CFO	YEMILE VERA	601 SW 123RD AVE
X Add			MIAMI. FL. 33184
Remove			
3) Change			
Add			
Remove			
4) Change			
Add			
Remove			
5) Change			
Add			
Remove			
o) Change			
Add			
Remove			

maen addim///(ti	dding additional Art sheets, if necessary).				
			-		
					
					· · · · · · · · · · · · · · · · · · ·
					
			····		
		•			
					
		<u> </u>			
					
provisions for in	provides for an exc aplementing the amo able, indicate N/A)	hange, reclassifica endment if not con	ntion, or cancellat ntained in the amo	ion of issued shar endment itself:	<u>es,</u>

	11/29/2018	
The date of each amendment(s) a	doption:	, if other than t
ate this document was signed.		
11/2 Effective date <u>if applicable</u> :	9/2018	
are a appreuse.	(no more than 90 days after amendment file date)	
Note: If the date inserted in this be ocument's effective date on the De	block does not meet the applicable statutory filing requirements, this epartment of State's records.	date will not be listed as t
doption of Amendment(s)	(<u>CHECK ONE</u>)	
The amendment(s) was/were add by the shareholders was/were su	opted by the shareholders. The number of votes cast for the amendmen officient for approval.	nt(s)
	proved by the shareholders through voting groups. The following state each voting group entitled to vote separately on the amendment(s):	ment
	for the amendment(s) was/were sufficient for approval	
by	(voting group)	
	(voting group)	
action was not required.	opted by the board of directors without shareholder action and shareholder opted by the incorporators without shareholder action and shareholder	lder
11/29/2018		
Dated		
Signature	5 ()	
(By a c	director, president or other officer – if directors or officers have not been done incomporator – if in the hands of a receiver, trustee, or other conted fiduciary by that fiduciary)	
	OMAR VERA	
	(Typed or printed name of person signing)	
	PRESIDENT	
	(Title of person signing)	