P18000094289

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COVER LETTER

TO: Amendment Section Division of Corporations

NAME OF CORPO	RATION: FORTEZZA CAP	ITAL PARTNERS INC.	
	BER: P18000094289		
	s of Amendment and fee are su	abmitted for filing.	
Please return all corre	espondence concerning this ma	atter to the following:	
	Rafael Benavente		
		Name of Contact Person	n
	Bright Capital Asset Manage	ement	
		Firm/ Company	
	1001 Brickell Bay Drive 32i	nd Floor	
		Address	
	Miami FL 33131		
		City/ State and Zip Cod	e
-	el@brighteapital.us		
		sed for future annual report	notification)
For further information	on concerning this matter, pleas	se call:	
Rafael Benavente		786 at (235-8700
Name of Contact Person			de & Daytime Telephone Number
Enclosed is a check f	or the following amount made	payable to the Florida Depa	artment of State:
□ \$35 Filing Fee	■\$43.75 Filing Fee & Certificate of Status	□S43.75 Filing Fee & Certified Copy (Additional copy is enclosed)	□\$52.50 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		Ameno Divisio Clifton	Address Iment Section on of Corporations Building Executive Center Circle

Tallahassee, FL 32301

Articles of Amendment to Articles of Incorporation of

FORTEZZA CAPITAL PARTNERS INC. (Name of Corporation as currently filed with the Florida Dept. of State) P18000094289 (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) 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; CEO- 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.

E vample: <u>X</u> Change	<u> </u>	John Doe	
X Remove	<u>V</u>	Mike Jones	
X Add	<u>sv</u>	Sally Smith	
Type of Action (Check One)	Title	<u>Name</u>	<u>Addres</u> s
1) Change	DIR	STRAZZOLINI, RONALDO	1001 Brickell Bay Drive
Add			32nd Floor
X Remove			Miami FL 33131
2) Change	DIR	PEPA, HERNAN	1001 Brickell Bay Drive
Add			32nd Floor
X Remove			Miami FL 33131
3) Change	DIR -	Calafe Miñones, Javier	1001 Brickell Bay Drive
X Add	<u> </u>		32nd Floor
Remove			Miami FL 33131
4) Change			<u> </u>
Add			
Remove			
5) Change			
Add			
Remove			-
6) Change			<u> </u>
Add			
Remove			

Attach additional sheets, if necessary).	ticles, enter change(s) here: (Be specific)
	<u> </u>
	THE CONTRACT OF THE CONTRACT O
	harman and a second
provisions for implementing the ame	hange, reclassification, or cancellation of issued shares, endment if not contained in the amendment itself:
(if not applicable, indicate N/A)	

November 20th 2018
The date of each aniendment(s) adoption:, if other than the
date this document was signed.
November 20th 2018 Effective date if applicable:
(no more than 90 days after amendment file date)
Note: If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as the document's effective date on the Department of State's records
Adoption of Amendment(s) (CHECK ONE)
■ The amendment(s) was were adopted by the shareholders. The number of votes cast for the amendment(s) by the shareholders was/were sufficient for approval.
The amendment(s) was were approved by the shareholders through voting groups. The following statement must be separately provided for each voting group entitled to vote separately on the amendment(s):
"The number of votes cast for the amendment(s) was/were sufficient for approval
by
(voling group)
☐ The amendment(s) was were adopted by the board of directors without shareholder action and shareholder action was not required. ☐ The amendment(s) was were adopted by the incorporators without shareholder action and shareholder action was not required.
Dated November 20th 2018
Signature
(By a director, president or other officer/- if directors or officers have not been
selected, by an incorporator – if in the hands of a receiver, trustee, objecter court appointed fiduciary by that fiduciary.)
appointed indicately by that reductary
Hernan Pep∎
(Typed or printed name of person signing)
Director
(Title of person signing)