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COVER LETTER

FO: Amendment Section Division of Corporations

NAME OF CO	RPORATION: MI MUNDO LIG	ERO, CORP.	
DOCUMENT N	0.1.00000000.4.1		
The enclosed Ar	ticles of Amendment and fee are s	ubmitted for filing.	
Please return all	correspondence concerning this m	atter to the following	
	JOSE HERNANDEZ		
		Name of Contact Perso	n
	SOPHOS CONSULTING G	ROUP COR!	
		Firm/ Company	
	8333 NW 53RD ST, STE 45	50	
		Address	
	DORAL, FL 33166		
		City/ State and Zip Cod	e
	SOPHOS.CG@GMAIL.CO	M	
	-	ised for future annual report	notification)
For further infor-	mation concerning this matter, plea	ase call: at (⁷⁸⁶) 9014967
N	lame of Contact Person		de & Daytime Telephone Number
Enclosed is a che	eck for the following amount made	payable to the Florida Dep	artment of State:
S35 Filing F	ee □S43.75 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	Amend Division The C 2415 I	Address Iment Section on of Corporations entre of Tallahassee N. Monroe Street, Suite 810 assee, FL 32303

Articles of Amendment to Articles of Incorporation of

MI MUNDO LIGERO, CORP.	7. 17.110.07		
(Name of Corporation as curren	ntly filed with the Florida Dept. of State)		
P18000099941			
(Document Number	r of Corporation (if known)		
Pursuant to the provisions of section 607.1006, Florida Statutes, thits Articles of Incorporation:	is Florida Profit Corporation adopts the following amendment(s)		
A. If amending name, enter the new name of the corporation:			
	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 "P.A	"company," or "incorporated" or the abbreviation "Corp.," A professional corporation name must contain the word		
B. Enter new principal office address, if applicable:	8333 NW 53RD STREET, SUITE 450		
(Principal office address MUST BE A STREET ADDRESS)	DORAL, FL 33166		
C. Paramana III. 11. 26. 19.11			
Enter new mailing address, if applicable: (Mailing address <u>MAY BE A POST OFFICE BOX</u>)	8333 NW 53RD STREET, SUITE 450		
	DORAL, FL 33166		
). If amending the registered agent and/or registered office ad			
new registered agent and/or the new registered office addre	<u>ss:</u>		
Name of New Registered Agent			
(Florida)	street address)		
	,		
New Registered Office Address:	, Florida		
	(Zip Code)		
New Registered Agent's Signature, if changing Registered Ager	nt:		
hereby accept the appointment as registered agent. I am familian	r with and accept the obligations of the position.		
Signature of New	Registered Agent, 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)

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>PT</u>	John Doe	
X Remove	$\underline{\mathbf{V}}$	Mike Jones	
X Add	<u>sv</u>	Sally Smith	
Type of Action (Check One)	<u>Title</u>	<u>Name</u>	Address
1) Change			_
Add			
Remove			
2) Change			
Add			
Remove 3) Change			
Add			
Remove			
4) Change			
Add			
Remove			
5) Change			- <u> </u>
Add			
Remove			
6) Change			
Add			

	tional sheets	s, if necessary).	(Be specific)			
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	04/09/2020	
The date of each amendment date this document was signed.		, if other than t
Effective date if applicable:	04/09/2020	
	(no more than 90 days after amendment file date)	
Note: If the date inserted in t document's effective date on the	his block does not meet the applicable statutory filing requirements, this date the Department of State's records.	e will not be listed as
Adoption of Amendment(s)	(<u>CHECK ONE</u>)	
■ The amendment(s) was/wer action was not required.	e adopted by the incorporators, or board of directors without shareholder action	n and shareholder
☐ The amendment(s) was/wer by the shareholders was/we	re adopted by the shareholders. The number of votes cast for the amendment(s) are sufficient for approval.)
☐ The amendment(s) was/wer	e approved by the shareholders through voting groups. The following statemer d for each voting group entitled to vote separately on the amendment(s):	ıt
	cast for the amendment(s) was/were sufficient for approval	
by		
· · · · · · · · · · · · · · · · · · ·	(voting group)	
Dated	Melitan Leideur	
Signature		
(By	y a director, president or other officer – directors or officers have not been lected, by an incorporator – if in the hands of a receiver, trustee, or other court pointed fiduciary by that fiduciary)	
(By	lected, by an incorporator – if in the hands of a receiver, trustee, or other court pointed fiduciary by that fiduciary) Wellika Libeur	
(By	lected, by an incorporator - if in the hands of a receiver, trustee, or other court	