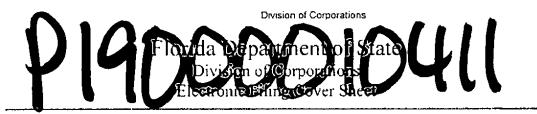
9/1/2021



Note: Please print this page and use it as a cover sheet. Type the fax audit number (shown below) on the top and bottom of all pages of the document.

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Division of Corporations
Fax Number : (850)617-6380

From:

Account Name : CONTADORSUNNYISLES.COM INC
Account Number : I20200000118
Phone : (305)260-6968
Fax Number : (786)513-7810

Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please.

Email Address:

COR AMND/RESTATE/CORRECT OR O/D RESIGN ALUTTI CONSULTING CORP

Certificate of Status	0
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Estimated Charge	\$35.00

SEP 0 2 2021

S. PRATHER

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Corporate Filing Menu

Help

Page: 3 of 6

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Articles of Amendment to Articles of Incorporation of

	of		
ALUTTI CONSULTING CORP			
(Name of Corporation as currently f	filed with the Florida Dept. o	of State)	.
P19000010411			6.3 (7) (7)
(Document Number o	Corporation (if known)		(**)
Pursuant to the provisions of section 607,1006, Floridits Articles of Incorporation:	ia Statutes, this Florida Profit	Corporation adopts the following	amendo
A. If amending name, enter the new name of the c	orporation:		Ξ;
			The ne
name must be distinguishable and contain the wo. "Corp.," "Inc.," or Co.," or the designation "Corp. word "chartered," "professional association," or the	p," "Inc," or "Co". A profe e abbreviation "P.A."	e," or "incorporated" or the abi	breviatio ontain ti
B. Enter new principal office address, if applicable (Principal office address MUST BE A STREET AD.			
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BO	<u>)x)</u>		
D. If amending the registered agent and/or registe new registered agent and/or the new registered		, enter the name of the	
Name of New Registered Agent			
	(Florido street address)		
New Registered Office Address:	,	, Florida	
New Registered Office Address.	(Cip)	(Zip Code)	
New Registered Agent's Signature, if changing Re- I hereby accept the appointment as registered agent.			
Signature of iv	-съ-ледыегей адепі, 13 спапд	,mg	

From: Paloma Duarte

(((H210003268273)))

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:

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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 Doc 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 Doc	
X Remove	$\underline{\mathbf{v}}$	Mike Jones	
X Add	<u>sv</u>	Sally Smith	
Type of Action (Check One)	<u>Title</u>	Name	<u>Address</u>
1) Change	VP	MARCELLO DE SOUZA SANT ANNA	150 Sunny isles Blvd Ap1-1006
✓_ ∧dd			Sunny Isles Beach, FL 33160
Remove			
2) Change			
Add			
Remove			
3) Change			
Add			
Remove			
4) Change			
Add			
Remove			
5) Change			
Add			
Remove			
6) Change			
Add			
Remove			

If amending or adding additional Articles, enter change(s) here: (Attach additional sheets, if necessary). (Be specific)						
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						•
						
If an arr	nandment ne	avides for an ex	change, reclass	ification or can	cellation of issue	ol chares
nrovisi	ions for impl	ementing the ar	mendment if not	contained in th	e amendment its	elf:
(if	not applicable	le, indicate N/A)				 -
-	• • •					
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The date of each amendment(s) adoption: date this document was signed.	, if other than the
Effective date if applicable:	
(no more than 90 days after amendment file date)	
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):	DZI SEP
"The number of votes cast for the amendment(s) was/were sufficient for approval	10 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1
by" (voling group)	
(voling group)	AH IO:
The amendment(s) was/were adopted by the board of directors without shareholder action and shareholder action was not required.	हें। इस्ताहरू इस्ताहरू
The amendment(s) was/were adopted by the incorporators without shareholder action and shareholder action was not required.	
Dated 8/31/21	
Signature AGATHA MELISSA MILERIS	
(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, or other court appointed fiduciary by that fiduciary)	
AGATHA MELISSA MILERIS	•
(Typed or printed name of person signing)	• • •
PRESIDENT	
(Title of person signing)	
	•