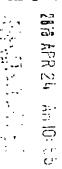
P19000020091

(Requestor's Name)
(Address)
(Address)
(City/State/Zip/Phone #)
PICK-UP WAIT MAIL
(Business Entity Name)
(Document Number)
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CHECK CONTRACTOR



•			·	• •
		COVER LETTER		- , .
TO: Amendment Section Division of Corpora				218 APR 24 AN IG: 55
NAME OF CORPORA	TION: LA C	ATRINA 1	INC	THE ANASSAL OF THE
DOCUMENT NUMBE	r:	20091		11.11 高档集第二年中间
	Amendment and fee are su			
Please return all correspo	ondence concerning this ma	ter to the following.		
	Victoria	Name of Contact Person	10 ZA	
_	10 00	Name of Contact Person	n	
_	XA CA	Name of Contact Person IRINA I I Firm/ Company	NC	<u> </u>
	155 HA	MPTON. PoiN	T SUITE 10	
_	ST. Au	Address 945 tive FL	7 SUITE 10 32092	<u></u> .
_		City/ State and Zip Cod	e	
	Victoria 100	10@icloud, ed) <i>y</i> .g	
	E-mail address: (to be u	ed for future annual report	notification)	•
For further information (concerning this matter, plea-	se call:		
	•		203 - 78'	7
Name of	Contact Person	Area Co	ode & Daytime Telephone Nu	mber
Enclosed is a check for t	the following amount made	payable to the Florida Dep	artment 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)	
Amen	ng Address dment Section on of Corporations	Anien	Address dment Section on of Corporations	

P.O. Box 6327 Tallahassee, FL 32314 Division of Corporations Clifton Building 2661 Executive Center Circle

Tallahassee, FL 32301

2818 APR 24 AT 10: 1

LA CATRINA (Name of Corporation as currently filed with the Florida Dept. of State) 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: The new 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 "chaitered," "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) , Florida_ New Registered Office Address: (Zip Code) (Cnv)

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

New Registered Agent's Signature, if changing Registered Agent:

Articles of Amendment to Articles of Incorporation 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 F. 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	PT John D	<u>loe</u>	
X Remove	<u>V</u> <u>Mike J</u>	<u>ones</u>	
X Add	<u>SV</u> <u>Sally S</u>	<u>imith</u>	
Type of Action (Check One)	<u>Title</u>	<u>Nam</u> e	<u>Addres</u> s
l) Change	<u>√ρ</u>	NURA I CARLON	1811 Hollow Glen-Drive Middleburg Fr 32068.
^ /d d			GLEN Drive
Remove			Middleburg Fr 32068.
2) Change			
Add			
Remove			
3) Change		-	
Add			
Remove			
4) Change			
Add			
Remove			
5) Change			
Add			
Remove			
6) Change			
Add			
Remove			

amending or s	dding additional Article	es, enter change(s)	here:		
mach additiona	sheets, if necessary). (ine specific)			
				· • • • • • • • • • • • • • • • • • • •	
		<u> </u>		·	
		·			
an amendmen	t provides for an exchan	nge, reclassification	ı. or cancellation of	issued shares.	
<u>provisions for i</u>	mplementing the amend	ment if not contain	ned in the amendme	nt itself:	
(if not appli	cable, indicate N/A)				
	1	-			

The date of each amendment(s) adoption:	, if other than the
Effective date if applicable: 04 /2 3/ 201 9.	
(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 document's effective date on the Department of State's records.	not be listed as the
Adoption of Amendment(s) (CHECK ONE)	
The amendment(s) was/were adopted by the shareholders. The number of votes east 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	
(voting 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 04/23/2019 -	
Signature Aug 22 Aug 25 Aug 2006 (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)	
Vic TURIA G ESPINOZA.	
(Typed or printed name of person signing)	
President.	

(Title of person signing)