P190000 21323

(Re	questor's Name)	
(Ad	dress)	
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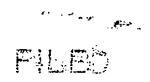
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COVER LETTER

TO: Amendment Section
Division of Corporations

NAME OF COI	RPORATION: MIAMI SUN ENE	ERGY CORP	
	UMBER: P19000021323		,
	ticles of Amendment and fee are su	bmitted for filing.	
Please return all	correspondence concerning this ma	tter to the following:	
	JOSE MOLDES		
		Name of Contact Person	
	INTERNATIONAL TAXES	INC	
		Firm/ Company	
	1125 NW 135CT		
		Address	· · · · · · · · · · · · · · · · · · ·
	MIAMI, FLORIDA 33182		
		City/ State and Zip Code	
	MOLDESJ@INTAXINC.COM		
	-	sed for future annual report	notification)
		·	
For further infor	nation concerning this matter, pleas	se call:	
JOSE MOLDES		at (305	229-2710
N	ame of Contact Person		de & Daytime Telephone Number
Enclosed is a che	ck for the following amount made	payable to the Florida Depa	rtment of State:
S35 Filing F	ee	□\$43.75 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 Divisio Clifton 2661 E	Address ment Section n of Corporations Building xecutive Center Circle ssee, FL 32301

Articles of Amendment to Articles of Incorporation of



MIAMI SUN ENERGY CORP

(Name o	of Corporation as curren	tly filed with the Florida D	Jebr Mataitel 30 1 15: 17 d
P19000021323			
	(Document Number	of Corporation (if known)	TALLAHAUNIN, PECKINA
Pursuant to the provisions of section 607, its Articles of Incorporation:	1006, Florida Statutes, thi	s Florida Profit Corporation	n adopts the following amendment(s) to
A. If amending name, enter the new na	ame of the corporation:		
N/A			The new
name must be distinguishable and con "Corp.," "Inc.," or Co.," or the design word "chartered," "professional associa	ation "Corp," "Inc," or	"Co". A professional corp	orporated" or the abbreviation
B. Enter new principal office address, if applicable:		12062 SW 117TH CT	
(Principal office address MUST BE A S		MIAMI, FL 33186	
			
C. Enter new mailing address, if appl. (Mailing address MAY BE A POST)		N/A	
(<u></u>			
			
			
D. <u>If amending the registered agent an</u> new registered agent and/or the new			name of the
-	N/A	33.	
Name of New Registered Agent			
		street address)	
New Registered Office Address:	N/A		, Florida
		(City)	(Zip Code)
		(3.17)	14,7 500.1,
New Registered Agent's Signature, if c			
I hereby accept the appointment as regist			tions of the position.
	Signature of New	Registered Agent if changing	<u></u>

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> <u>J</u>	ohn Doe		
X Remove	<u>v</u> <u>N</u>	<u> 1ike Jones</u>		
X Add	<u>\$V</u> <u>\$</u>	ally Smith		
Type of Action (Check One)	<u>Title</u>	<u>Name</u>	<u>Addres</u> s	
1) X Change	P	NOELIO D DIAZ FERNANDEZ	714 SW 96 CT	
Add			MIAMI,FL 33174	
Remove				
2) X Change	VP	LISANDRA DIAZ RUIZ	10881 SW 7TH ST	
Add			MIAMI, FL 33174	
Remove				
$\frac{X}{X}$ Change	MGR	CARLOS ROBAINA PINO	10881 SW 7TH ST	
Add			MIAMI, FL 33174	
Remove				
4) Change			 	
Add			 	
Remove				
5) Change		•		
/ Add				
Remove				
6) Change				
Add				
Remove				

E. If amending or adding additional Articles, enter change(s) here: (Attach additional sheets, if necessary). (Be specific)
CHANGE PICIPAL ADRESS AND STOCK HOLDERS ADRESS
F. If an amendment provides for an exchange, reclassification, or cancellation of issued shares,
provisions for implementing the amendment if not contained in the amendment itself: (if not applicable, indicate N/A)
N/A

	04/26/2019	
The date of each amendment(s) date this document was signed.	adoption:	, if other than th
	1/26/2019	
Effective date <u>if applicable</u> :	(no more than 90 days after amendment	file date)
Note: If the date inserted in thi document's effective date on the	s block does not meet the applicable statutory filing req Department of State's records.	uirements, this date will not be listed as th
Adoption of Amendment(s)	(<u>CHECK ONE</u>)	
The amendment(s) was/were a by the shareholders was/were	dopted by the shareholders. The number of votes cast fo sufficient for approval.	r the amendment(s)
	pproved by the shareholders through voting groups. The or each voting group entitled to vote separately on the an	
"The number of votes ca	st for the amendment(s) was/were sufficient for approval	l.
by	(voting group)	
	(voting group)	
☐ The amendment(s) was/were a action was not required.	dopted by the board of directors without shareholder acti	ion and shareholder
☐ The amendment(s) was/were a action was not required.	dopted by the incorporators without shareholder action a	nd shareholder
	/2019	
DatedSignature	91.f	
(By scleen	director, president or other officer – if directors or office ted, by an incorporator – if in the hands of a receiver, tru- inted fiduciary by that fiduciary)	
	NOELIO D DIAZ FERNANDEZ	
	(Typed or printed name of person signing)	
	PRESIDENT	
	(Title of person signing)	