P19000028422

(Requestor's Name)	
(Address)	
(Address)	700
(City/State/Zip/Phone #)	
PICK-UP WAIT MAIL	
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(Business Entity Name)	
(Document Number)	
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FLORIDA DEPARTMENT OF STATE Division of Corporations

January 29, 2021

HERNAN CLARKE DEFILE CORPORATION 698 NE 1ST AVE, #4004 MIAMI, FL 33132

SUBJECT: DEFILE CORPORATION

Ref. Number: P19000028422

We have received your document and check(s) totaling \$43.75. However, the enclosed document has not been filed and is being returned to you for the following reason(s):

IS THIS CORPORATION BECOMING A BENEFIT CORPORATION? IF IT IS NOT, PLEASE COMPLETE THE PROFIT ARTICLES OF AMENMENT ATTACHED AND RESUBMIT.

THE CERTIFICATE OF AMENDMENT TO CERTIFICATE OF INCORPORATION IS NOT REQUIRED. PLEASE RETAIN.

The document must be signed by the chairman, any vice chairman of the board of directors, its president, or another of its officers listed.

The name and title of the person signing the document must be noted beneath or opposite the signature.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6050.

Susan Tallent Regulatory Specialist II-

Letter Number: 921A00002167

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COVER LETTER

TO: Amendment Section Division of Corporations

NAME OF CORPORA	ATION: P &	ile Corpor	ation	_
DOCUMENT NUMBE	er: 710000;	18422		_
The enclosed Articles of	f Amendment and fee are su	bmitted for filing.		
Please return all corresp	ondence concerning this ma	tter to the following:		
	Herrau Cl	arke.		
_	THE COLUMN	Name of Contact Person		
		Corpora +107-	o ~	
	<u> </u>	Firm/ Company		
	698 NE.	1 St Are 4	4004	
_		Address		
	Miami =	Flore La 3317 City/ State and Zip Code	3~	
_		City/ State and Zip Code		
		file miami . cou		
-		sed for future annual report noti		
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For further information (concerning this matter, plea	se call:		
1 :	α i			
-tterna	·····		586-6173	
Name of	Contact Person	Area Code &	Daytime Telephone N	Number
Enclosed is a check for t	the following amount made	payable to the Florida Departme	ent of State:	for chock
☐ \$35 Filing Fee	□\$43.75 Filing Fee &	-	\$52.50 Filing Fee	fee check Alieady Paid
	Certificate of Status		Certificate of Status	· /
		. ,	Certified Copy (Additional Copy	
		· ,	is enclosed)	
Mailir	ng Address	Street Add	tress	
Amendment Section Amendment Section				
Division of Corporations P.O. Box 6327 Division of Corporations The Centre of Tallahassee				
	30x 6327 assee, FL 32314		e of Taffahassee Ionroe Street, Suite 8	U10
البالبانية ا	MOUNT, I L. JAJIT	2712 IV. IVI	romoc pacer, parte c	/ I U

Tallahassee, FL 32303

Articles of Amendment

to

Articles of Incorporation of

DEFILE	CORPORATION

Check if applicable

 \square The amendment(s) is/are being filed pursuant to s. 607.0120 (11) (e), F.S.

(Name of Corporation as currently filed with the Florida Dept. of State)	
P19900028422	
(Document Number of Corporation (if known)	•
Pursuant to the provisions of section 607.1006, Florida Statutes, this <i>Florida Profit Corporation</i> adopts the following amen its Articles of Incorporation:	idment(s) to
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 "Cor" "Inc.," or Co.," or the designation "Corp," "Inc," or "Co". A professional corporation name must contain the victority "chartered." "professional association." or the abbreviation "P.A."	rp.," vord
B. Enter new principal office address, if applicable: (Principal office address MUST BE A STREET ADDRESS) Miami, FL 33132	<u>4</u> 004
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:	- <u>4</u> 004 - -
Name of New Registered Agent HERNAN CIARKE	
New Registered Office Address: New Registered Office Address: (City) New Registered Office Address: (City) (Zip Code)	132
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; 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.

Example: X Change	<u>PT</u> John E	<u> </u>	
X Remove	<u>V</u> <u>Mike J</u>	ones	
X Add	<u>SV</u> <u>Sally S</u>	<u>Smith</u>	
Type of Action (Check One)	Tille Prasidet &	Name	Address
1) A Change	CEO CEO	Hernan chicke	698 NE 15+ NIE #4604
Add			Miami FL 33132
Remove			,
2) X Change	<u>C00</u>	Darina odstrciloua	698 (VE 35 AVe + 400
Add			Miam. FL 23132
Remove 3) Change			
Add			
Remove			
4)Change			
Add			
Remove			<u> </u>
5) Change			
Add			
Remove			· · · · · · · · · · · · · · · · · · ·
6) Change Add			
Add Remove			

E. If amending or adding additional Articles, enter change(s) here: (Attach additional sheets, if necessary). (Be specific)	
1. Change article IV: The new total number of	
1. Change article IV: The new total number of Shares Tooned is 10,000,000 (TEN MILLION)	
2. Charge article VII: Name & address apthe 11	ncopers
HERMAN CLARKE	
HERNAN CLARKE 698 NE 1st Ave #4004. Miami Florida 33132	_
3. change Article V: Name and addess of Registed	Agent
Herrau Clarke	
Herran Clarke 698 NE 25th Ave, #4004	
Miam: FL 33132	
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)	
<u> </u>	
	

The date of each amendment(s) acd date this document was signed.	loption: 01/35/202)	if other than the
Effective date <u>if applicable</u> :		
	(no more than 90 days after amendment file dat	(e)
Note: If the date inserted in this bl document's effective date on the De	ock does not meet the applicable statutory filing requirement of State's records.	nts, this date will not be listed as the
Adoption of Amendment(s)	(CHECK ONE)	
The amendment(s) was/were ado action was not required.	pted by the incorporators, or board of directors without share	cholder action and shareholder
☐ The amendment(s) was/were ado by the shareholders was/were su	pted by the shareholders. The number of votes cast for the afficient for approval.	mendment(s)
	roved by the shareholders through voting groups. The follow each voting group entitled to vote separately on the amendm	
"The number of votes cast	for the amendment(s) was/were sufficient for approval	
by		
,	(voting group)	
Dated Ö// Signature	30/.2021 Al-1-	
selected	rector president or other officer – if directors or officers have by an incorporator – if in the hands of a receiver, trustee, or ed fiduciary by that fiduciary)	
	Herran Clarke	
	(Typed or printed name of person signing)	
	President 5 CED	
	(Title of person signing)	