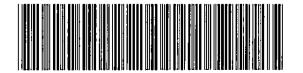
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COVER LETTER

TO: Amendment Section Division of Corporations

NAME OF CORP	ORATION: MIAMITHE BES	T QUALITY WORKS, I:	NC.
	MBER: P19000033230		
The enclosed Article	les of Amendment and fee are su	bmitted for filing.	
Please return all co	rrespondence concerning this ma	tter to the following:	
	TANIA E. HERNANDEZ B	ERMUDEZ	
		Name of Contact Person	on .
	MIAMI THE BEST QUALI	TY WORKS, INC.	
		Firm/ Company	
	1491 NW 65TH STREET AI	PT 203	
		Address	
	MIAMI, FL 33147		
		City/ State and Zip Co	de
	gloriabermudez776@gmail.c	om	
	E-mail address: (to be us	sed for future annual repor	rt notification)
For further informa	tion concerning this matter, pleas	se call:	
TANIA E. HERNA	ANDEZ BERMUDEZ	305	748-1794 ode & Daytime Telephone Number
Nan	ne of Contact Person	Area C	ode & Daytime Telephone Number
Enclosed is a check	for the following amount made	payable to the Florida De	partment of State:
S35 Filing Fee	□\$43.75 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)
Д Р	Mailing Address Amendment Section Division of Corporations 2.O. Box 6327 Fallahassee, FL 32314	Amer Divis The (t Address idment Section ion of Corporations Centre of Tallahassee N. Monroe Street, Suite 810

Tallahassee, FL 32303

Articles of Amendment to **Articles of Incorporation**

MIAMI	THE	REST:	OHAL	1TY	WORKS.	INC

The new "company," or "incorporation name must contain the word A." ddress in Florida, enter the name of the ress:
The new "company," or "incorporated" or the abbreviation "Corp.," A professional corporation name must contain the word A." ddress in Florida, enter the name of the
The new "company," or "incorporated" or the abbreviation "Corp.," A professional corporation name must contain the word A."
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ddress in Florida, enter the name of the
a street address)
, Florida

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.

Example: X Change	<u>PT</u>	John Doc	
X Remove	<u>V</u>	Mike Jones	
_X Add	<u>sv</u>	Sally Smith	
Type of Action (Check One)	Title	Name	Address
1) Change	VP	OSCAR D. LOPEZ GONZALES	1491 NW 65TH ST APT 203
Add			MIAMI, FL 33147
X Remove			
2) Change			
Add			
Remove 3) Change			
Add			
Remove			
4) Change			
Add			
Remove			
5) Change			
Add			
Remove			
6) Change			
Add			
Remove			

attach additional sheets, if necessary	articles, enter change(s y. (Be specific)	<u></u>		
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f an amendment provides for an e provisions for implementing the a	xchange, reclassification mandment if not contribute	on, or cancellation of ined in the amendm	ont itealf:	
(if not applicable, indicate N/A)	in <u>enoment it not conta</u>	med in the amendin	ent noch.	
				
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	ich amendment(s) ado nent was signed.	option:	, it other man th
	03/27	/2024	
Effective date	if applicable:	(no more than 90 days after amendment file date)	
		ino mino many again amonaming analy	
Note: If the d document's eff	ate inserted in this blo fective date on the Dep	ck does not meet the applicable statutory filing requirements, this artment of State's records.	date will not be listed as th
Adoption of A	mendment(s)	(<u>CHECK ONE</u>)	
	ment(s) was/were adop not required.	ted by the incorporators, or board of directors without shareholder a	ction and shareholder
	ment(s) was/were adop cholders was/were suff	ted by the shareholders. The number of votes cast for the amendme ficient for approval.	ent(s)
must he sej	parately provided for e	oved by the shareholders through voting groups. The following state ach voting group entitled to vote separately on the amendment(s):	ement
"The	number of votes cast for	or the amendment(s) was/were sufficient for approval	
by		(voting group)	
. –		(voting group)	
	03/27/2024		
	Dated		
	Signature X	Temas Hemandes	
	(By a dire selected.	ector, president or other officer – if directors or officers have not be by an incorporator – if in the hands of a receiver, trustee, or other c d fiduciary by that fiduciary)	
	٦	TANIA E. HERNANDEZ BERMUDEZ	
	_	(Typed or printed name of person signing)	<u>, </u>
	ī	PRESIDENT	
	_	(Title of person signing)	