P19000036215

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SECRETARY OF STAI

COVER LETTER

TO: Amendment Section Division of Corporations

NAME OF CORPORATION: RENOVACION	MUSIC, INC.
DOCUMENT NUMBER: P19000036215	· ·
The enclosed Articles of Amendment and fee are	submitted for filing.
Please return all correspondence concerning this n	natter to the following:
MIGUEL F ZAPATA	
 -	Name of Contact Person
RENOVACION MUSIC.	INC.
	Firm/ Company
7950 NW 53RD ST 337	
	Address
MIAMI/FL/33166	
	City/ State and Zip Code
MICKEZAPATA@HOTM	IAIL.COM
E-mail address: (to be	used for future annual report notification)
For further information concerning this matter, ple	ease ca
MIGUEL F ZAPATA	
Name of Contact Person	Area Code & Daytime Telephone Number
Enclosed is a check for the following amount mad	le payable to the Florida Department of State:
S35 Filing Fee S43.75 Filing Fee & Certificate of Status	
Mailing Address Amendment Section	Street Address Amendment Section

Division of Corporations
P.O. Box 6327

Tallahassee, FL 32314

Amendment Section
Division of Corporations
The Centre of Tallahassee
2415 N. Monroe Street, Suite 810
Tallahassee, FL 32303

Articles of Amendment to Articles of Incorporation of

FILED

RENOVACION MUSIC, INC.		none MAY 10 av moon
(Name	of Corporation as curren	tly filed with the Florida Dept. of State
P19000036215		SECRETARY OF STATE Of Corporation (if known) TALLAHASSEE. FL
	(Document Number	of Corporation (if known) IALLAHASSEE, FL
Pursuant to the provisions of section 607, its Articles of Incorporation:	1006, Florida Statutes, this	s Florida Profit Corporation adopts the following amendment(s) to
A. If amending name, enter the new n	ame of the corporation:	
N/A		The new
name must be distinguishable and contain "Inc" or Co" or the designation "C "chartered," "professional association,"	Corp." "Inc." or "Co".	"company," or "incorporated" or the abbreviation "Corp.," A professional corporation name must contain the word
B. Enter new principal office address,	if applicable:	N/A
(Principal office address <u>MUST BE A S</u>	TREET ADDRESS)	
C. Enter new mailing address, if applicable:		N/A
(Mailing address MAY BE A POST	OFFICE BOX)	
D. If amending the registered agent ar	ad/or registered office ad	dress in Florida, enter the name of the
new registered agent and/or the ne		
Name of New Registered Agent	N/A	
Name of New Registered Agent		
	(Florida s	treet address)
	N/A	
New Registered Office Address:		City) , Florida (Zip Code)
New Registered Agent's Signature, if o		
I hereby accept the appointment as regis.	tered agent. I am familiar	with and accept the obligations of the position.
	Signature of New	Registered Agent, if changing

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 Doe $\underline{\mathbf{V}}$ X Remove Mike Jones SVSally Smith <u>X</u> Add Address Type of Action Title Name (Check One) VEGA LLERA ,ANGEL GABRIEL 7950 NW 53RD ST 337 1) ____ Change MIAMI, FL, 33166 ____ Add Remove 7950 NW 53RD ST 337 VEGA LIERA ANGEL GABRIEL 2) ____ Change MIAMI, FL, 33166 Add Remove SANDOVAL TERRAZAS EDGAR 7950 NW 53RD ST 337 3) ____ Change MIAMI, FL, 33166 ___ Add Remove SANDOVAL TERRASAS EDGAR 7950 NW 53RD ST 337 4) ____ Change MIAMI, FL, 33166 Add ____ Remove 5) ____ Change ___ Add __ Remove 6) ____ Change Add Remove

	litional sheets, if ne	cessary). (Be	specific)				
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If an amen	idment provides fo	or an exchange.	, reclassificatio	n, or cancellati	on of issued st	<u>ares,</u>	
provision:	s for implementin	g the amendme	nt if not conta	ined in the ame	ndment itself:		
	t applicable, indica	ne wa)					
/A							
							
							
							 .

	05/08/22	
The date of each amen	dment(s) adoption:	, if other than the
date this document was	signed.	
	05/08/22	
Effective date if application	able: (no more than 90 days after amendment file date)	
	(no more man su auxs after amenamens fue aute)	
	ted in this block does not meet the applicable statutory filing requirements, this date we te on the Department of State's records.	ill not be listed as the
Adoption of Amendme	ent(s) (<u>CHECK ONE</u>)	
The amendment(s) w action was not requir	ras/were adopted by the incorporators, or board of directors without shareholder action at red.	nd shareholder
	vas/were adopted by the shareholders. The number of votes cast for the amendment(s) was/were sufficient for approval.	
☐ The amendment(s) w must be separately p	ras/were approved by the shareholders through voting groups. The following statement provided for each voting group entitled to vote separately on the amendment(s):	
"The number o	of votes cast for the amendment(s) was/were sufficient for approval	
by	."	
· · · · · · · · · · · · · · · · · · ·	(voting group)	
	05/08/22	
Dated		
Signa	ture Christian S. Labrada.	
.,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	(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)	
	CHRISTIAN S LABRADA CONTRERAS	
	(Typed or printed name of person signing)	
	PRESIDENT/OFFICER/DIRECTOR	
	(Title of person signing)	