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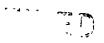
## COVER LETTER

**TO:** Amendment Section Division of Corporations

NAME OF CORPOR	ATION: Hudelka Italia, Inc					
DOCUMENT NUMB						
	f Amendment and fee are su	abmitted for filing.				
Please return all corresp	ondence concerning this ma	tter to the following:				
		Marc Felice				
_		Name of Contact Person	n			
_		Firm/ Company				
		28041 Bridgetown Ct #	5523			
_	Address					
	Bonita Springs, FL 34135					
_		City/ State and Zip Cod	c			
		md.felice@gmail.com				
	E-mail address: (to be us	sed for future annual report	notification)			
For further information	concerning this matter, pleas	se call:				
Marc Felice		at ( <u>23</u> 9	821-9342			
Name of Contact Person			de & Daytime Telephone Number			
Enclosed is a check for	the following amount made	payable to the Florida Depa	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)			
Mailing Address Amendment Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314		Amend Divisio Clifton	Address ment Section on of Corporations Building xecutive Center Circle			

Tallahassee, FL 32301

## Articles of Amendment to Articles of Incorporation



	otly filed with the Florida Dept. of State)
(Name of Corporation as curren	ntly filed with the Florida Dept. of State)
Hudelka Italia	. Inc
(Document Number	of Corporation (if known)
Pursuant to the provisions of section 607.1006, Florida Statutes, thits Articles of Incorporation:	is Florida Profit Corporation adopts the following amendment(s) to
A. If amending name, enter the new name of the corporation:	
MDF Consultants, Inc	, ma
name must be distinguishable and contain the word "corporat "Corp.," "Inc.," or Co.," or the designation "Corp." "Inc," or word "chartered," "professional association," or the abbreviation	"Co". A professional corporation name must contain the
B. Enter new principal office address, if applicable:	28041 Bridgetown Court #5523
(Principal office address MUST BE A STREET ADDRESS)	Bonita Springs, FL 34135
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)	28041 Bridgetown Court #5523
	Bonita Springs, FL 34135
D. If amending the registered agent and/or registered office ad new registered agent and/or the new registered office addre	
Name of New Registered Agent	
(Florida s	treet address)
New Registered Office Address:	, Florida
New neglistered Office radiress.	(Cuy) (Zip Code)
New Registered Agent's Signature, if changing Registered Ager	<u>nt:</u>
hereby accept the appointment as registered agent. I am familian	with and accept the obligations of the position.
Signature of More	Registered Agent, if changing
Signature of New	regeneres agent, if chunging

## 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 De	<u>oe</u>	
X Remove	<u>V</u>	Mike Jo	ones .	
X Add	<u>sv</u>	Sally Sr	<u>mith</u>	
Type of Action (Check One)	<u>Title</u>		<u>Name</u>	Address
l) Change			<del></del>	
Add				<del>_</del>
Remove				
2) Change		_		
Add				
Remove				
3 ) Change	_	_		
Add				
Remove				
4) Change		_		
Add				
Remove				
S) Change				
5) Change		_		
Add				
Remove				
6) Change		_		·
Add				
Remove				

	dding additional Arti sheets, if necessary).	(Be specific)	-		
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·		<del></del>			
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<u>-</u>				<u>-</u>	
			-		
<u> </u>					
	<u> </u>				
f an amendment	provides for an exch	ange, reclassification	on, or cancellation	of issued shares,	
(if not applie	nplementing the amer cable, indicate N/A)	adment it not conta	ined in the amenda	nent itself:	
(у та аррац	ane, marcare may				
<del>-</del>					······································
				·	
				<u> </u>	

The date of each amendment(s) a date this document was signed.	loption:, if other than
Effective date <u>if applicable</u> :	
	(no more than 90 days after amendment file date)
<b>Note:</b> If the date inserted in this bedocument's effective date on the De	block does not meet the applicable statutory filing requirements, this date will not be listed as partment of State's records.
Adoption of Amendment(s)	( <u>CHECK ONE</u> )
☐ The amendment(s) was/were add by the shareholders was/were su	opted by the shareholders. The number of votes cast for the amendment(s) fficient for approval.
	proved by the shareholders through voting groups. The following statement 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 add action was not required.	opted by the board of directors without shareholder action and shareholder
The amendment(s) was/were addaction was not required.	pted by the incorporators without shareholder action and shareholder
Dated	12/20/19
Signature	11/1
selecte	irector, prevident or other officer – if directors or officers have not been d, by an incorporator – if in the hands of a receiver, trustee, or other court led fiduciary by that fiduciary)
	Marc Felice
	(Typed or printed name of person signing)
	President
	(Title of person signing)

the

the