P190000 39432

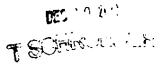
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COVER LETTER

TO: Amendment Section Division of Corporations

NAME OF CORPOR	ATION: CORAMART INC			
DOCUMENT NUMB	ER:			
The enclosed Articles of	of Amendment and fee are su	ibmitted for filing.		
Please return all corres	pondence concerning this ma	tter to the following:		
	HUMBERTO GONZALEZ			
•	· · · · · · · · · · · · · · · · · · ·	Name of Contact Persor	1	
	CORAMARTING			
		Firm/ Company		
	13312 SW 136TH TERRAX	Е		
•		Address		
	MIAMI FL 33186			
•		City/ State and Zip Cod	u	
INFO	@CORABLADES.COM			
	E-mail address: (to be us	sed for future annual report	notification)	
For further information	concerning this matter, pleas	se call:		
HUMBERTO GONZA	ALEZ	786 at (2519800	
Name of Contact Person		Area Code & 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)	
	ling Address		Address	
Amendment Section		Amendment Section		
Division of Corporations		Division of Corporations Clifton Building		
P.O. Box 6327 Tallahassee, FL 32314		2661 Executive Center Circle		

Tallahassee, FL 32301

Articles of Amendment to Articles of Incorporation of

CORAMART INC			
	currently filed with the Flor	ida Dept. of <u>State</u>)	
P19000039432			
(Document Nu	umber of Corporation (if know	wn)	
ursuant to the provisions of section 607,1006, Florida Statut s Articles of Incorporation:	tes, this <i>Florida Profit Corpo</i>	oration adopts the following amendmen	nt(s
. If amending name, enter the new name of the corporat	tion:		
CORABLADE INC		The new	
ame must be distinguishable and contain the word "cor Corp.," "Inc.," or Co.," or the designation "Corp." "Inc ord "chartered." "professional association," or the abbrev	c." or "Co". A professiona		
3. Enter new principal office address, if applicable:		19.1	
Principal office address MUST BE A STREET ADDRESS		iii 🥇 💆 📆	
		52 VI F	
		Party	ĺ
. Enter new mailing address, if applicable:			ļ
(Mailing address MAY BE A POST OFFICE BOX)		2: 0	
<u> </u>		20° №	
). If amending the registered agent and/or registered offi	ice address in Florida, enter	r the name of the	
new registered agent and/or the new registered office		THE HALLE W. INC.	
Name of New Registered Agent			
Mane by then negative angent			
	lorida street address)		
New Registered Office Address:	(City)	, Florida (Zip Code)	
	• •		
lew Registered Agent's Signature, if changing Registered	d Agent:		
hereby accept the appointment as registered agent. I am fo		bligations 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 Doe	
X Remove	<u>V</u>	Mike Jones	
X Add	<u>sv</u>	Sally Smith	
Type of Action (Check One)	<u>Title</u>	<u>Nume</u>	<u>Addres</u> s
1) Change			
Add			
Remove			
2) Change			nse.
Add			NOW 7
Remove			25
3) Change			3. 3 m
Add	_		0 0 0
Remove			
4) Change			
Add			
Remove			
5) (1)			
5) Change			
Add			
Remove			
6) Change			
Add			
Remove			

If amending or adding additional Articles, enter change(s) here: Attach additional sheets, if necessary). (Be specific)		
		_
		_
		_
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		_
		_
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·	40	
f an amendment provides for an exchange, reclassification, or cancellation of issued shares	NOV 25	
provisions for implementing the amendment if not contained in the amendment itself: (if not applicable, indicate N/A)		ï
(<i>y</i> , <i>y</i>	= C	Ċ
	2: n2	_
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		_
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		_

	11/15/2019	
The date of each amendment(s) date this document was signed.	adoption:	_, if other than the
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 requirements, this date will Department of State's records.	not be listed as the
Adoption of Amendment(s)	(<u>CHECK ONE</u>)	
☐ The amendment(s) was/were a by the shareholders was/were	adopted by the shareholders. The number of votes cast for the amendment(s) sufficient for approval.	
	approved by the shareholders through voting groups. The following statement for each voting group entitled to vote separately on the amendment(s):	
"The number of votes ca	ast for the amendment(s) was/were sufficient for approval	
by	(voting group)	
,	(voting group)	
☐ The amendment(s) was/were a action was not required.	adopted by the board of directors without shareholder action and shareholder	
The amendment(s) was/were action was not required.	adopted by the incorporators without shareholder action and shareholder	F 11.
14/15/20 Dated	***	
Signature		S O
tBy	redirector, president or other officer – if directors or officers have not been coted, by an incorporator – if in the hands of a receiver, trustee, or other points of intended fiduciary by that fiduciary)	2:0
	HUMBERTO GONZALEZ	
	(Typed or printed name of person signing)	
	PRESIDENT	
	(Title of person signing)	