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COVER LETTER

TO: Amendment Section Division of Corporations

NAME OF CORPO	RATION: Emma Internation	al Investments Inc.	
DOCUMENT NUM	BER: P19000041664		
	s of Amendment and fee are su	bmitted for filing.	
Please return all corre	espondence concerning this ma	atter to the following:	
	William Rivera		
		Name of Contact Person	1
	Emma International Investme	ents Inc.	
		Firm/ Company	-
	5460 Ste 405		
		Address	
	Orlando, FI 32812		
		City/ State and Zip Code	e
	williamabogado85@hotmail.	com	
	E-mail address: (to be us	sed for future annual report	notification)
For further information	on concerning this matter, plea	se call:	
William Rivera		407 at (
Name	of Contact Person	Area Co	de & Daytime Telephone Number
Enclosed is a check f	or the following amount made	payable to the Florida Depa	artment of State:
\$35 Filing Fee	□\$43.75 Filing Fee & Certificate of Status	☐\$43.75 Filing Fee & Certified Copy (Additional copy is enclosed)	S52.50 Filing Fee Certificate of Status Certified Copy (Additional Copy is enclosed)
Am Div P.C	iting Address tendment Section vision of Corporations D. Box 6327 lahassee, FL 32314	Amend Divisio The Co	Address Iment Section In of Corporations entre of Tallahassee N. Monroe Street, Suite 810

Tallahassee, FL 32303

Articl	es of Amendment	<u>.</u> .	201
Article	to s of Incorporation	<u>;</u> .	22 5
Attick	of	. :	SE 2
Emma International Investments Inc.			» 12
(Name of Corporation as co	urrently filed with the Florida Dept. of State)	17:	
P19000041664		1	<u> </u>
(Document Nu	mber of Corporation (if known)		
Pursuant to the provisions of section 607.1006, Florida Statute its Articles of Incorporation:	es, this Florida Profit Corporation adopts the follow	ing amendn	nent(s) to
A. If amending name, enter the new name of the corporat	tion:		
N/A		The ne	าเก
name must be distinguishable and contain the word "corporati "Inc.," or Co.," or the designation "Corp," "Inc," or "C "chartered," "professional association," or the abbreviation	Co". A professional corporation name must conta	tion "Corp.,	
B. Enter new principal office address, if applicable:	N/A		
(Principal office address MUST BE A STREET ADDRESS)		•
			
			
C. Enter new mailing address, if applicable:	N/A		
(Mailing address <u>MAY BE A POST OFFICE BOX</u>)			
D. If amending the registered agent and/or registered office	no address in Elevida, onto the name of the		
new registered agent and/or the new registered office a			
Name of New Registered Agent N/A			
of the regimened tigeth		_	
(Flo	orida street address)	_	
New Registered Office Address:	, Florida		
<u>New Registerea Office Adaress</u> .		Code)	
New Registered Agent's Signature, if changing Registered I hereby accept the appointment as registered agent. I am fai			
, , , , , , , , , , , , , , , , , , , ,	,		
Characteria	Name Productional transfer (Colombia	_	
signature of	New Registered Agent, if changing		

Check if applicable \Box 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)

Example:

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.

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>Name</u>	Address
1) Change	P	Dayana M. Martinez Avila	5460 Hoffner Ave
Add		-	Ste 405
x Remove			Orlando, Fl 32812
2) Change	VP	Editson J. Rodriguez Salamanca	5460 Hoffner Ave
Add			Ste 405
			Orlando, Fl 32812
X Remove 3) Change	VP	Paola Rivera	5460 Hoffner Ave
XAdd			Ste 405
Remove			Orlando, Fl 32812
4) X Change	P	William Rivera	5460 Hoffner Ave
Add			Ste 405
Remove			Orlando, Fl 32812
5) Change			
Add			
Remove			
6) Change			
Add			
Remove			

E. If amending or adding additional Article (Attach additional sheets, if necessary).	les, enter change(s) here: (Be specific)
N/A	
	
F. If an amendment provides for an excha	inge, reclassification, or cancellation of issued shares, dment if not contained in the amendment itself:
(if not applicable, indicate N/A)	until i not contained in the antendirent isseg.
N/A	

•

	if other tha	n the
date this document was signed.		
8/25/2022 Effective date if applicable:		
(no more than 90 days after amendment file date)		
Note: If the date inserted in this block does not meet the applicable statutory filing requirements, this date will no document's effective date on the Department of State's records.	t be listed a	as the
Adoption of Amendment(s) (CHECK ONE)		
☐ The amendment(s) was/were adopted by the incorporators, or board of directors without shareholder action and sha action was not required.	reholder	
■ The amendment(s) was/were adopted by the shareholders. The number of votes cast for the amendment(s) by the shareholders was/were sufficient for approval.		
☐ The amendment(s) was/were approved by the shareholders through voting groups. The following statement must be separately provided for each voting group entitled to vote separately on the amendment(s):	Ž L	2022
"The number of votes cast for the amendment(s) was/were sufficient for approval		2022 SF5
by"		
(voting group)	111	
A		
Dated	.Civid)	7: 11
(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)		
William Rivera		
(Typed or printed name of person signing)		
President		

(Title of person signing)

• . .