 -		
(Re	questor's Name)	
(Ad	ldress)	
(Ad	ldress)	
(,	
(Cit	ty/State/Zip/Phon	e #)
PICK-UP	WAIT	MAIL
(Bu	isiness Entity Na	me)
`	,	•
(Do	cument Number)	}
Certified Copies	_ Certificate	s of Status
0	Ellin Del	
Special Instructions to	Filing Officer:	

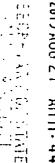
Office Use Only

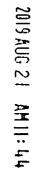


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COVER LETTER

TO: Amendment Section Division of Corporations

NAME OF CORPO	RATION: Bamba Promos, Co	υ,	
	BER: P19000043885		
	of Amendment and fee are su	bmitted for filing.	
Please return all corre	spondence concerning this ma	tter to the following:	
	Antonio Manueco		
		Name of Contact Person	1
	Bamba Promos, Co.		
		Firm/ Company	
	1800 N Bayshore Dr. #909		
		Address	
	Miami, FL 33132		
		City/ State and Zip Cod	<u> </u>
anto	nio@bambapromos.com		
	•	sed for future annual report	notification)
		,	
For further informatic	on concerning this matter, pleas	se call:	
Antonio Manueco		305 at (5239131
Name	of Contact Person	Area Co	de & Daytime Telephone Number
Enclosed is a check for	or the following amount made	payable to the Florida Depa	artment of State:
S35 Filing Fee	□S43.75 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)
	iling Address endment Section		Address Iment Section
Div	ision of Corporations	Divisio	on of Corporations
	. Box 6327 lahassee, FL 32314		Building Secutive Center Circle
1 111	mnassee, 14, 24,314		issee, FL 32301

Articles of Amendment to Articles of Incorporation of

Bamba Promos, Co.			
(Name)	of Corporation as curre	<u>ntly filed with the Flori</u> da Dej	pt. of State)
P19000043885			
	(Document Number	of Corporation (if known)	·• · •
Pursuant to the provisions of section 607, its Articles of Incorporation:	.1006, Florida Statutes, th	is Florida Profit Corporation	adopts the following amendment(s) to
A. If amending name, enter the new na	ame of the corporation:		
	 		(2)
name must be distinguishable and con "Corp.," "Inc.," or Co.," or the design word "chartered," "professional associa	uation "Corp." "Inc." or	"Co". A professional corpo	Thenew porated" or the abbreviation ration name must contain the
B. Enter new principal office address,	if annlicable:	N/A	20
(Principal office address MUST BE A S		N/A	19 AU
		N/A	20 %
C. Enter new mailing address, if appl. (Mailing address MAY BE A POST)		N/A	
		N/A	
		N/A	
D. If amending the registered agent an new registered agent and/or the new			ame of the
Name of New Registered Agent	N/A		
	N/A		
		street address)	
	N/A		
<u>New Registered Office Address</u> :	-	(City)	, Florida(Zip Code)
New Registered Agent's Signature, if c	hanging Registered Age	nt:	
Thereby accept the appointment as regist	tered agent. I am familia	ir with and accept the obligation	ons of the position.
	Signature of New	v 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 officeridirector 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{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>	<u>Addres</u> s
1) Change	1)	ARCHILLA, CHRISTINE E	6709 BISCAYNE BLVD, APT 201
Add			MIAMI, FL 33138
X Remove	D	MANUECO ANTONIO	TOTALS: DAVOLITABLE IND. #0000
2) Change	D	MANUECO, ANTONIO	1800 N BAYSHORE DR. #909
X Add			MIAMI, FL 33132
Remove			
3) Change			
Add			
Remove			
4) Change			
Add			
Remove			,
51 Change			_
Add			
Remove			
6) Change			_
Add			
Remove			

	h additional sheets, if necessary). (Be specific)
VA	
	· · · · · · · · · · · · · · · · · · ·
	· · · · · · · · · · · · · · · · · · ·
	- 1
. If an	amendment provides for an exchange, reclassification, or cancellation of issued shares,
pro	visions for implementing the amendment if not contained in the amendment itself:
	(if not applicable, indicate N/A)
7A	
	

	entis) adoption:, if other than the
date this document was sign	æd.
Effective date <u>if applicable</u>	e:
	(no more than 90) days after amendment file state)
	in this block does not meet the applicable statutory filing requirements, this date will not be listed as the ii the Department of State's records.
Adoption of Amendments	s) (<u>CHECK ONE</u>)
	were adopted by the shareholders. The number of votes cast for the amendment(s) /were sufficient for approval.
☐ The amendment(s) was/v must be separately prov	were approved by the shareholders through voting groups. The following statement ided for each voting group entitled to vote separately on the amendment(s):
	ites cast for the amendment(s) was/were sufficient for approval
hy	(voting group)
•	(voting group)
The unendment(s) was/ action was not required.	were adopted by the board of directors without shareholder action and shareholder
☐ The amendment(s) was/saction was not required.	were adopted by the incorporators without shareholder action and shareholder
	72019
Dated Signature	- James
	(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)
	Antonio Manueco
	(Typed or printed name of person signing)
	C(0)
	(Title of person signing)

. . . .