P19 000048578

(Reque	estor's Name)	
(Addre	ess)	
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(City/S	State/Zip/Phone	e #)
PICK-UP	MAIT	MAIL
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(Docu	ment Number)	· · · · · · · · · · · · · · · · · · ·
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COVER LETTER

TO: Amendment Section Division of Corporations

NAME OF CORPOR	RATION: LUHNA CORP		-
DOCUMENT NUMI			
The enclosed Articles	of Amendment and fee are su	bmitted for filing.	
Please return all corre	spondence concerning this ma	tter to the following:	
	CARLA V. MARTINEZ		
	-	Name of Contact Persor	1
	LUHNA CORP		
		Firm/ Company	
	1101 BRICKELL AVE SOU	TH TOWER 8 FLOOR	
		Address	
	MIAMI, FL 33130		
		City/ State and Zip Code	2
ninas	erhe@gmail.com		
	E-mail address: (to be us	sed for future annual report	notification)
For further informatio	n concerning this matter, pleas	se call:	
CARLA V. MARTIN	IEZ	at (504-7165
Name	of Contact Person	Area Co	de & Daytime Telephone Number
Enclosed is a check for	r the following amount made	payable to the Florida Depa	rtment of State:
\$35 Filing Fee	□S43.75 Filing Fee & Certificate of Status	☐S43.75 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 Street Address

Amendment Section
Division of Corporations
Clifton Building

Articles of Amendment to Articles of Incorporation of

	01
LUHNA CORP	
(Name of Corporation as curre	ently filed with the Florida Dept. of State)
219000048578	
(Document Number	er of Corporation (if known)
Pursuant to the provisions of section 607.1006, Florida Statutes, t is Articles of Incorporation:	his Florida Profit Corporation adopts the following amendment(s)
. If amending name, enter the new name of the corporation:	<u>.</u>
	The new
name must be distinguishable and contain the word "corpore "Corp.," "Inc.," or Co.," or the designation "Corp," "Inc," o word "chartered," "professional association," or the abbreviatio	or "Co". A professional corporation name must contain the
B. Enter new principal office address, if applicable:	
Principal office address <u>MUST BE A STREET ADDRESS</u>)	
	119 (
	===
Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)	(3) 69
(Matting dadress SEAT BE A FOST OFFICE BOA)	
	
D. If amending the registered agent and/or registered office a	ddress in Florida, enter the name of the
new registered agent and/or the new registered office addi	ress:
Name of New Registered Agent	
(Florida	a street address)
New Registered Office Address:	, Florida
	(City) (Zip Code)
	(City) (Zip Code)
New Registered Agent's Signature, if changing Registered Ag	ent:
hereby accept the appointment as registered agent. I am famili	

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: <u>X</u> Change	<u>PT</u>	John Doc	
X Remove	<u>V</u>	Mike Jones	
X Add	SV	Sally Smith	
Type of Action (Check One)	<u>Title</u>	<u>Name</u>	Address
1) Change	S	ONDINA NASER	1101 BRICKELL AVE
Add			SOUTH TOWER 8 FLOOR
X Remove			MIAMI, FL 33130
2) Change			
Add			
Remove			<u> </u>
3) Change			
Add			27
Remove			
4) Change		_	30
Add			
Remove			
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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If an amendment provides for an exchange, reclassification, or cancellation of issued shares,			
provisions for implementing the amendment if not contained in the amendment itself: (if not applicable, indicate N/A)			
			_
			_

ate this document was signed. 109/24/2019 (no more than 90 days after amendment file date) (no more than 90 days after amendment file date) (ite: If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as ocument's effective date on the Department of State's records. (CHECK ONE) 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): "The number of votes cast for the amendment(s) was/were sufficient for approval by	09/24/2019	
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by		nt
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action was not required. The amendment(s) was/were adopted by the incorporators without shareholder action and shareholder action was not required. Signature (By a feeton 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) ONDINA NASER (Typed or printed name of person signing)	(voting group)	
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(Typed or printed name of person signing)	Signature (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)	FILED EP 27 AMIO: 30
		····
SECRETARY	(Typed or printed name of person signing)	
	SECRETARY	

(Title of person signing)