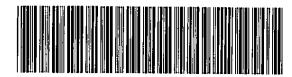
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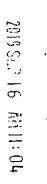
(Requ	estor's Name)	·
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PICK-UP	☐ WAIT	MAIL
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Certified Copies	Certificates	of Status
Special Instructions to Fili	ng Officer:	

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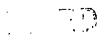
COVER LETTER

TO: Amendment Section Division of Corporations

NAME OF CORPO	RATION: Iorio Corp			
	BER: P19000064925			
	s of Amendment and fee are su	ibmitted for filing.		
Please return all corre	espondence concerning this ma	itter to the following:		
	Peter Cagle			
		Name of Contact P	erson	
	PBC Accounting & Tax Serv	rices Corp		
		Firm/ Compan	y	
	9700 S Dixie Hwy Suite 930			
	-	Address	·	
	Miami, FL 33156			
		City/ State and Zip	Code	
peter	@pbctaxes.com			
	E-mail address: (to be u	sed for future annual re	port notification)	
For further information	on concerning this matter, pleas	se call:		
Peter Cagle		at (536-7659	
Name	of Contact Person	Are	a Code & Daytime Telephone Number	
Enclosed is a check for	or the following amount made	payable to the Florida	Department of State:	
S35 Filing Fee	□S43.75 Filing Fee & Certificate of Status	□\$43.75 Filing Fee Certified Copy (Additional copy is enclosed)	Certificate of Status	
	iling Address		reet Address	
Amendment Section Division of Corporations			Amendment Section	
P.O. Box 6327			vision of Corporations ifton Building	
Tallahassee, FL 32314		2661 Executive Center Circle		

Tallahassee, FL 32301

Articles of Amendment to Articles of Incorporation of



ly filed with the Florida Deposition of Corporation (if known) Florida Profit Corporation of	٠.	ng amendment(s) to
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Florida Profit Corporation o	dopts the following	ng amendment(s) to
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on," "company," or "incorp "Co". A professional corpor "P.A." N/A	orated" or the a ation name must	_The new hbreviation contain the
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N/A ress in Florida, enter the na	me of the	
<u>s:</u>		
	·	_
reet address)		_
	_, Florida	
(City)	(Zip	Code)
	ss of the position.	_
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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 Doc 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.

Mike Jones, V as Remo Example:	ve, and Sa	lly 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>	<u>Addres</u> s
1) Change	VP	Juan Carlos Rada	9700 S Dixie Hwy Suite 930
X Add			Miami, FL 33156
Remove			
2) Change			_
Ađd			
Remove			
3) Change			
Add			
Remove			
4) Change			
Add			
Remove			
5) Change			
Add			
Remove			
6) Change			
Add			
Remove			

	 If amending or adding additional Arti (Attach additional sheets, if necessary). 	(Be specific)	
provisions for implementing the amendment if not contained in the amendment itself: (if not applicable, indicate N/A) (/A	N/A		
provisions for implementing the amendment if not contained in the amendment itself: (if not applicable, indicate N/A) /A			
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provisions for implementing the amendment if not contained in the amendment itself: (if not applicable, indicate N/A) A			
(if not applicable, indicate N/A) /A	If an amendment provides for an exch	nange, reclassification, or cancellation of issued shares,	
/A	provisions for implementing the amer	ndment if not contained in the amendment itself:	
	A		
	<u> </u>		

N/A	
The date of each amendment(s) adoption:	, if other than the
date this document was signed.	
N/A Effective date <u>if applicable</u> :	
(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 widocument's effective date on the Department of State's records.	ll not be listed as the
Adoption of Amendment(s) (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 "	
(voting group)	
☐ The amendment(s) was/were adopted by the board of directors without shareholder action and shareholder action was not required.	
☐ The amendment(s) was/were adopted by the incorporators without shareholder action and shareholder action was not required.	
9/10/2019	
Dated	
Signature Oliv Capel	
(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)	
Peter Cagle	
(Typed or printed name of person signing)	
Registered Agent/Accountant	

(Title of person signing)