To:

## Division of Corporations Page 1 of 1 Division of Corporations Electronic Filing Cover Sheet

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To:

Division of Corporations

Fax Number : (850) 617-6390

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## COR AMND/RESTATE/CORRECT OR O/D RESIGN SOLVENTA CORP

Certificate of Status	0	
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Help

TO: Amendment Section

## COVER LETTER

Division of Corp	porations				
NAME OF CORPO	RATION: SOLVENTA COR	P			
DOCUMENT NUM	BER: P19000065040				
	of Amendment and fee are sul	bmitted for filing.	<del></del> -		
	espondence concerning this mal				
	_				
	Cheyenne Moseley				
		Name of Contact Person	1		
	LegalZoom.com, Inc.				
		Firm/ Company			
	101 N. Brand Blvd., 11th Flo	or			
		Address			
	Glendale, CA 91203				
		City/ State and Zip Code	<u>-</u>		
	heman@solvenia.com				
		ed for future annual report	notification)		
			,		
For further information	on concerning this matter, pleas	se call:			
Chevenne Moseley		31 (	773-0888 ext. 9724		
Name	of Contact Person	at ( 800 ) 773-0888 ext. 9724  Area Code & Daytime Telephone Number			
Enclosed is a check for	or the following amount made p	payable to the Florida Depa	artment of State:		
□ \$35 Filing Fee	Sal3.75 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		Address		
	endment Section vision of Corporations	Amendment Section Division of Corporations			
P.C	), Hox 6327	The Centre of Tallahassee			
Tal	Jahassee, FL 32314	2415 N. Monroe Street, Suite 810 Tallahassee, FL 32303			

## Articles of Amendment to Articles of Incorporation of

SOLVENTA CORP				
(Name (	of Corporation as curren	tly filed with the Florida Dept. of State)		
19000065040				
	(Document Number)	of Corporation (if known)		
ursuant to the provisions of section 607. s Articles of Incorporation:	1006, Florida Statutes, this	s Florida Profit Corporation adopts the following amendment(s)		
. If amending name, enter the new n	ame of the corporation:			
	ar bu are	The _new		
ame must be distinguishable and contait Inc' or Co.," or the designation "C chartered," "professional association."	Torp." "Inc." or "Co".	"company," or "incorporated" or the abbreviation "Corp.," A professional corporation name must comain the word		
. Enter new principal office address,	19790 W Dixie Hwy. Office 412			
Principal office address MUST BE AS		Miami, FL 33180		
Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)		19790 W Dixie Hwy. Office 412		
		Miami, Fl. 33180		
i. If amending the registered agent an new registered agent and/or the new		dress in Florida, enter the name of the		
Name of New Registered Agent		<u> </u>		
	19790 W Dixie Hwy, Off	ice 412 20		
New Registered Office Address:	(Florida si Miumi	ireei address)		
		(Ciny) (Zip Code)		
		ת		
lew Registered Agent's Signature, if c				
hereby accept the appointment as regist	ered agent. I am familiar	with and accept the abligations of the position.		
	Signature of New I	Registered Agent, if changing		
Check if applicable				

☐ The omendment(s) is/are being filed pursuant to s. 607.0120 (11) (c). 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)

Please note the officer/director title by the first letter of the office title.

P = President; V= Vice President: T= Treusurer: 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. Example:

X Change	PT	John Doc	
X Remove	<u>v</u>	Mike Jones	
X Add	<u>sv</u>	Sally Smith	
Type of Action (Check One)	Title	Name	Address
I) Change			
Add			
Remove			
2) Change		·	
∧dd			
Remove Change			
Remove			
4) Change			
Add			
Remove			
5) Chunge		_	
Add			
Remove			
6) Change	<del></del>		<del></del>
Add			
Remove			

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. If amending or adding additional Articles, enter change(s) here: (Attach additional sheets, if necessary) — (Be specific)						
		<u> </u>			<del></del>	
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	<del></del>				<del></del>	<del></del>
				<u> </u>		
If an amendment	provides for an exclude plementing the ame	nange, reclassifi	cation, or cane	ellation of issue	d shares.	
provisions for in	oble, indicate MA)	<u>ndment if not c</u>	ontained in the	amendment its	<u>sell:</u>	
()	,					
	-		<del></del> _	<del></del>		<del></del>
				<del> </del>	<del></del>	
			<del>-</del> ! "	-		
<del></del>						

7/11//2020
The date of each amendment(s) adoption:
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 not be listed as document's effective date on the Department of State's records.
Adoption of Amendment(s) (CHECK ONE)
☐ The amendment(s) was/were adopted by the incorporators, or board of directors without shareholder action and shareholder action was not required.
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)
Dated 07/17/2020 Signature
(By a director, president or other officer = 11 directors or officers have not been selected, by an incorporator = if in the hands of a receiver, trustee, or other count appointed figurerary by that fiduciary)
Hernan Pablo Arcioni
(Typed or printed name of person signing)
President
(Title of person signing)