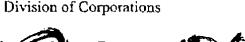
Page 1 of 2





Note: Please print this page and use it as a cover sheet. Type the fax audit number (shown below) on the top and bottom of all pages of the document.

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Note: DO NOT hit the REFRESH/RELOAD button on your browser from this page. Doing so will generate another cover sheet.

To:

Division of Corporations

Fax Number : (850) 617-6380

From:

Account Name : JULIO MORAN MULTI-SERVICES, CORP.

Account Number : I20190000059 Phone : (305)643-3922 Fax Number : (305)643-3211

\*\*Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please. \*\*

Email Address: OUTLETIMPOYTSUSQ @GMAIL. COM

#### COR AMND/RESTATE/CORRECT OR O/D RESIGN **OUTLET IMPORTS USA CORP**

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S. YOUNG

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# H19 000 2627573

#### 'Articles of Amendment to Articles of Incorporation of

OUTLET IMPORTS USA, CORP					
(Name of Corporation as curren	tly filed with the Florida Dept. of State)				
P19000065662					
(Document Number	of Corporation (if known)				
Pursuant to the provisions of section 607.1006, Florida Statutes, thi its Articles of Incorporation:	s Florida Profit Corporation adopts the fo	llowing amendmen	t(s) to		
A. If amending name, enter the new name of the corporation:					
name must be distinguishable and contain the word "corporati "Corp.," "Inc.," or Co.," or the designation "Corp.," "Inc," or	ion," "company," or "incorporated" or "Co". A professional corporation name	The new the abbreviation must-contain the			
word "chartered," "professional association," or the abbreviation	"P 4 "				
B. Enter new principal office address, if applicable:	102 SE 1st. STREET, SUITE 109		<u> </u>		
(Principal office address <u>MUST BE A STREET ADDRESS</u> )	MJAMI, FL 33131	30	= im		
		The state of the s	·⊃		
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)	SAME	9: 05 :: 11 0RIDA			
D. If amending the registered agent and/or registered office address new registered agent and/or the new registered office address	tress in Florida, enter the name of the				
Name of New Registered Agent					
·	•				
(Florida si	tree: address)				
New Registered Office Address:	, Florida				
	(City)	(Zip Code)			
New Registered Agent's Signature, if changing Registered Agen	•				
hereby accept the appointment as registered agent. I am familiar	with and accept the obligations of the posi	itton.			

Signature of New Registered Agent, if changing

#### H19000 2629 573

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: X Change	PT	John Do	ne		
X Remove	<u>v</u>	Mike Jo	<u>ones</u>		
_X Add	<u>sv</u>	Sally Sr	<u>pith</u>		
Type of Action (Check One)	Title		<u>Name</u>	Address	
1) Change		_			<del></del>
Add					
Remove					<del></del>
2) Change		_			
Add					<u>.</u> .
Remove					
3)Change		<del></del>			
Add					
Remove				·-··	
4) Change		<b></b>			•
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Remove					<del></del> .
5) Change		_			
Add					
Remove					
5) Change					
Add		~			•
Remove					

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### H190002627573

The date of each amendment date this document was signed	AUGUST 23, 2019	_, if other than the
Escrive date if applicable:	AUGUST 23, 2019	
	(no more than 90 days after amendment file date)	
Note: If the date inserted in document's effective date on the	this block does not meet the applicable statutory filing requirements, this date will re- the Department of State's records.	not be listed as the
Adoption of Amendment(s)	(CHECK ONE)	
☐ The amendment(s) was/wer by the shareholders was/we	e adopted by the shareholders. The number of votes cast for the amendment(s) are sufficient for approval.	
☐ The amendment(s) was/wer must be separately provide	e approved by the shareholders through voting groups. The following statement d 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)	
	(voting group)	
☐ The amendment(s) was/wern action was not required.	e adopted by the board of directors without shareholder action and shareholder	
The amendment(s) was/were action was not required.	adopted by the incorporators without shareholder action and shareholder	
	7ST 23, 20 9	
Dated		
Signature		
أعجوا	and rector president or other officer – if directors or officers have not been ected, by an incorporator – if in the hands of a receiver, trustee, or other court pointed fiduciary by that fiduciary)	
·	JUAN C. CUNDA	
	(Typed or printed name of person signing)	
	PRESIDENT	
	(Title of person signing)	