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COVER LETTER

TO: Amendment Section Division of Corporations Ale Anzola P.A NAME OF CORPORATION: DOCUMENT NUMBER: The enclosed Articles of Amendment and fee are submitted for filing. Please return all correspondence concerning this matter to the following: Ale Anzola PA Firm/ Company 1750 N BayShore Dr Address Hiami, FL 33132 City/ State and Zip Code aleantola realtor @gmail. com E-mail address: (to be used for future annual report notification) For further information concerning this matter, please call: Hejardra Hnzola Name of Contact Person at (786) 537.5557 Area Code & Davtime Telephone Number Enclosed is a check for the following amount made payable to the Florida Department of State:

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Mailing Address

\$35 Filing Fee

Amendment Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314

□\$43.75 Filing Fee &

Certificate of Status

Street Address

Amendment Section
Division of Corporations
The Centre of Tallahassee
2415 N. Monroe Street, Suite 810
Tallahassee, FL 32303

□\$52.50 Filing Fee

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Articles of Amendment to

Articles of Incorporation

HIE HNZOLA +	2A
(Name of Corporation as currently	filed with the Florida Dept. of State)
FIN 84-290	1810
(Document Number of C	Corporation (if known)
Pursuant to the provisions of section 607.1006, Florida Statutes, this FI its Articles of Incorporation:	orida Profit Corporation adopts the following amendment(s) to
7.0	The new
name must be distinguishable and contain the word "corporation," "co. "Inc.," or Co.," or the designation "Corp," "Inc," or "Co". A properties of the abbreviation "P.A."	ORIGINAL ADDRESS -> 3480 NW 8570 CF
B. Enter new principal office address, if applicable: (Principal office address <u>MUST BE A STREET ADDRESS</u>)	Doral FL 33122 1750 N BayShore Dr, Apt 3401
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)	Higm: FL 33132 1750 N Bryshore Dr, Apt 3401 Miami, FL 33132
D. If amending the registered agent and/or registered office address: Name of New Registered Agent	
(1 tortace siree)	33132 Florida 331323 (Zip Code)
New Registered Agent's Signature, if changing Registered Agent: I hereby accept the appointment as registered agent. I am familiar with	th and accept the obligations of the position.

Signature of New Registered Agent, if changing

Check if applicable

☐ The amendment(s) is/are being filed pursuant to s. 607.0120 (11) (e), 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)

Example:

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.

X Change	PT John [<u>Doe</u>		
X Remove	<u>V</u> <u>Mike</u> .	<u>Jones</u>		
<u>X</u> Add	SV Sally S	<u>Smith</u>		
Type of Action (Check One)	<u>Title</u>	<u>Name</u>	<u>Addres</u> s	
1) MA Change	N/A	N/A	N/A	
Add				_
Remove				
2) Change				
Add				_
Remove 3) Change				_
Add				
Remove				
4) Change				_
Add				
Remove				_
5) Change	-			_
Add				
Remove				_
6) Change				_
Add				
Remove				

E. <u>If amending or adding</u> (Attach <i>additional shee</i>	g additional Articles, enter of ts, if necessary). (Re specif	<u>change(s) here</u> : îc)		
	N/A			
				, <u> </u>
-				
-				
			<u></u>	
		<u> </u>		
			 .	
If an amendment prov	vides for an exchange, recla	ssification or cance	llation of issued shares	
provisions for implei (if not applicable,	menting the amendment if n	ot contained in the	amendment itself:	3
	N/A			
		 	-	
			 	
	 		 .	

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, .

The date of each amendment(s) adoption:		, if other than th
date this document was signed.		
Effective date <u>if applicable</u> :		
	(no more than 90 days after amendment file date)	
Note: If the date inserted in this block doe document's effective date on the Department	s not meet the applicable statutory filing requirements, this date to of State's records.	will not be listed as th
Adoption of Amendment(s) (9	CHECK ONE)	
The amendment(s) was/were adopted by taction was not required.	the incorporators, or board of directors without shareholder action a	and shareholder
☐ The amendment(s) was/were adopted by t by the shareholders was/were sufficient f	the shareholders. The number of votes cast for the amendment(s) or approval.	
	the shareholders through voting groups. The following statement ing group entitled to vote separately on the amendment(s):	
"The number of votes cast for the ar	mendment(s) was/were sufficient for approval	
by		
(voting group)	
Dated 2/6/2 Signature (By a director, p	opo id- resident or other officer - if directors or officers have not been	
selected, by an i	ncorporator – if in the hands of a receiver, trustee, or other court ary by that fiduciary)	
	Alejandra Anzola.	
	(Typed or printed name of person signing)	
<u> </u>	Director.	
	(Title of person signing)	