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2021 OCT 18 PM 9: 08 SECRETARY OF STATE

COVER LETTER

TO: Amendment Section Division of Corporations

NAME OF CORPO	RATION: MARIOLOPEZTO	ORRES INC.			
DOCUMENT NUM	BER:				
	of Amendment and fee are su	bmitted for filing.			
Please return all corre	spondence concerning this ma	tter to the following:			
	Scott Mast				
		Name of Contact Person	1		
	MARIOLOPEZ TURR ES INC				
		Firm/ Company			
	527 Northwood Rd				
		Address			
	West Palm Beach, FL 33407				
	City/ State and Zip Code				
	scottmast@me.com				
		sed for future annual report	notification)		
	E-man address. (10 oc ds	sed for future atmosf report	nonnearion,		
For further informatio	n concerning this matter, pleas	se call:			
Scott Mast		at (303) 596-2398 de & Daytime Telephone Number		
Name	of Contact Person	Area Co	de & Daytime Telephone Number		
Enclosed is a check for	or the following amount made	payable to the Florida Depa	artment of State:		
\$35 Filing Fee	☐\$43.75 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)		
Mailing Address Amendment Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314		Amend Divisio The Co	Address ment Section n of Corporations entre of Tallahassee V. Monroe Street, Suite 810		

Tallahassee, FL 32303

Articles of Amendment to Articles of Incorporation of

FILED 2021 OCT 18 PM 9: 08

MARIOLOPEZTORRES INC.			SECRETARY OF SI
(Name o	of Corporation as curre	itly filed with the Florida Dept. of Stat	e) MLLAHASSEE, FI
P19000069896			
	(Document Number	of Corporation (if known)	<u> </u>
Pursuant to the provisions of section 607, its Articles of Incorporation:	1006, Florida Statutes, th	is Florida Profit Corporation adopts the	following amendment(s) to
A. If amending name, enter the new na	ame of the corporation:		
			The new
name must be distinguishable and contain "Inc.," or Co.," or the designation "C "chartered," "professional association."	Torp, " "Inc," or "Co".	A professional corporation name mus	breviation "Corp.,"
B. Enter new principal office address, (Principal office address <u>MUST BE A S</u>			
			
			
C. Enter new mailing address, if appl (Mailing address <u>MAYBE A POST</u>			
		-	
D. If amending the registered agent ar new registered agent and/or the new			<u>:</u>
	Scott Mast		
Name of New Registered Agent		 	
	841 Upland Rd		
		street address)	
New Registered Office Address:	West Palm Beach	Florida	33401
		(City)	(Zip Code)
New Registered Agent's Signature, if c I hereby accept the appointment as regist			osition.
, , , , , , , , , , , , , , , , , , ,	Mill é	1/12/	
	Signature of Nev	Rogistaged 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)

Please note the officer director tale 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.

Mike Jones, V as Reme	ive, and Sally Si	nith, SV as an Ada.	
Example: <u>X</u> Change	<u>101</u> <u>T9</u>	n <u>n Doe</u>	
X Remove	<u>V</u> <u>M</u> j	ke Jones	
<u>X</u> Add	<u>SV</u> <u>Sa</u>	lly Smith	
Type of Action	<u>Title</u>	<u>Name</u>	<u>Addres</u> s
(Check One)	Р	Sofia Romero Plata	720 S. Sapodilla Ave
1) Change X			Apt 410, Courtyards of City Place
<u>^</u> Add			West Palm Beach, FL 33401
Remove	D	Juan Goiricelaya	841 Upland Rd
2) Change			West Palm Beach, FL 33401
Add			
$\frac{X}{X}$ Remove Change	P, S	Juan Goiricelaya	
Add	_		841 Upland Rd
Remove			West Palm Beach, FL 33401
4) Change	CEO	Juan Goiricelaya	841 Upland Rd
X Add			West Palm Beach, FL 33401
Remove			
5) Change			
Add			
Remove			
6) Change			
Add			

If amending or adding additional Arti (Attach additional sheets, if necessary).	(Be specific)
	
	
	hange, reclassification, or cancellation of issued shares, endment if not contained in the amendment itself:
(if not applicable, indicate N/A)	
dding Sofia Romero Plata as President	
an Goiricelaya is listed twice, once as dir	rector, and then again as President and Secretary. Please remove him as director.
ien change him from President and Secre	etary to CEO.
-	
-	

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	(s) adoption:	if other than the
date this document was signed	- 10/13/24	
Effective date <u>if applicable</u> :	(no more than 90 days after amendment	file date)
	this block does not meet the applicable statutory filing rec he Department of State's records.	quirements, this date will not be listed as the
Adoption of Amendment(s)	(<u>CHECK ONE</u>)	
The amendment(s) was/wer action was not required.	re adopted by the incorporators, or board of directors withou	ut shareholder action and shareholder
☐ The amendment(s) was/wei by the shareholders was/w	re adopted by the shareholders. The number of votes east for sufficient for approval.	or the amendment(s)
	re approved by the shareholders through voting groups. The d for each voting group entitled to vote separately on the a	
"The number of votes	east for the amendment(s) was/were sufficient for approva	al .
by		_
	(voting group)	
Dated	10/14/21	
Signature	(TO MICIO	
(B	y a director, president or other officer - if directors or offic	
	lected, by an incorporator – if in the hands of a receiver, tripointed fiduciary by that fiduciary)	ustee, or other court
	Sofia Romero Plata	
	(Typed or printed name of person signing)
	President of MARIOLOPEZTORRES	
	(Title of person signing)	

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