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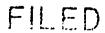
SECRETARY OF STA

COVER LETTER

TO: Amendment Section Division of Corporations

NAME OF CORPOR	ATION: SUNCOAST ENT	ERPRISES OF MI	AMI CO	RP.	
DOCUMENT NUMB	ER:				
	f Amendment and fee are su	bmitted for filing.			
Please return all corresp	oondence concerning this ma	tter to the followin	Ř.		
		Edwin Ar	mijo		
_	Name of Contact Person				
	Simplex Group Inc				
_		Firm/ Com	pany		
	75	00 NW 52ND ST.	SUITE	00	
_	Address				
	MIAMI FL 33166				
_		City/ State and	Zip Code	2	
ŭ	rumeliomedina@yahoo.es				
-	E-mail address: (to be us	sed for future annu-	al report	notification)	
For further information Eumelio Medina	concerning this matter, pleas		786	3972314	
Name o	f Contact Person	ai (Area Co) 3972314 de & Daytime Telephone Number	
Enclosed is a check for	the following amount made				
S35 Filing Fee	☐\$43.75 Filing Fee & Certificate of Status	S43.75 Filing Certified Copy (Additional copenclosed)	y	☐\$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 2415 N	Address ment Section n of Corporations entre of Tallahassee N. Monroe Street, Suite 810 essee, FL 32303	

Articles of Amendment to Articles of Incorporation of



SUNCOAST ENTERPRISES OF MIAMI CORP		2022 JAN 18 PH 12: 1.9	
(<u>Name</u>	of Corporation as current	tly filed with the Florida Dept. of State)	
P19000070491		SECRETARY OF STATE TALLAHASSER FLORE	
	(Document Number	of Corporation (if known)	
Pursuant to the provisions of section 607 its Articles of Incorporation:	'.1006, Florida Statutes, this	s Florida Profit Corporation adopts the following amendment(
A. If amending name, enter the new n	name of the corporation:		
		The new	
name must be distinguishable and contai "Inc.," or Co.," or the designation " "chartered," "professional association,	Corp," "Inc," or "Co".	"company," or "incorporated" or the abbreviation "Corp.," A professional corporation name must contain the word	
B. Enter new principal office address, if applicable: (Principal office address MUST BE A STREET ADDRESS)		1040 SEMINOLE DR APT 1653	
		Fort Lauderdale FL 33304	
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)		1040 SEMINOLE DR APT 1653	
		Fort Lauderdale FL 33304	
		·	
		dress in Florida, enter the name of the	
new registered agent and/or the ne	w registered office addres	<u>ss:</u>	
Name of New Registered Agent			
Name of New Registered Agent	1040 SEMINOLE DR AF	PT 1653	
Name of New Registered Agent	1040 SEMINOLE DR AF	PT 1653 street address)	
Name of New Registered Agent New Registered Office Address:	1040 SEMINOLE DR AF		

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	<u>PT</u>	John Doe		
X Remove	<u>V</u>	Mike Jones		
X Add	<u>SV</u>	Sally Smith		
Type of Action (Check One)	Title	<u>Name</u>	Address	
1) X Change	P	Eumelio A Medina	1040 SEMINOLE DR APT 1653	
Add			Fort Lauderdale FL 33304	
Remove				
2) Change				
Add				
Remove 3) Change				
Add				
Remove				
4) Change				
Add				
Remove				
5) Change			·	
Add				
Remove				
6) Change				
Add				
Remove				

	
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	wides for an exchange, reclassification, or cancellation of issued shares,
If an amendment pro	
provisions for imple	menting the amendment if not contained in the amendment itself:
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rovisions for imple	menting the amendment if not contained in the amendment itself: , indicate N/A)

The date of each amendment(date this document was signed.	s) adoption:	, if other than the
Effective date <u>if applicable</u> :		
	(no more than 90 days after amer	idment file date)
Note: If the date inserted in the document's effective date on the	is block does not meet the applicable statutory file Department of State's records.	ing requirements, this date will not be listed as the
Adoption of Amendment(s)	(<u>CHECK ONE</u>)	
The amendment(s) was/were action was not required.	adopted by the incorporators, or board of directors	without shareholder action and shareholder
☐ The amendment(s) was/were by the shareholders was/we	adopted by the shareholders. The number of votes re sufficient for approval.	s cast for the amendment(s)
☐ The amendment(s) was/were must be separately provided	approved by the shareholders through voting grou I for each voting group entitled to vote separately o	ps. The following statement n the amendment(s):
"The number of votes	east for the amendment(s) was/were sufficient for a	pproval
by		
	(voting group)	
Dated	01/12/2022	
Signature	Essf	
sel	a director, pesident or other officer – if directors ected, by any incorporator – if in the hands of a recepointed fiduciary by that fiduciary)	or officers have not been iver, trustee, or other court
	EUMELIO A MEDINA	
	(Typed or printed name of person s	igning)
	President	
	(Title of person signing)	