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## COVER LETTER --

TO: Amendment Section Division of Corporations

NAME OF CORPORATION:	227 L	1W 13 Ave	Corp	
/ 1	90000			
The enclosed Articles of Amendme	nt and fee are sub	mitted for filing.		
Please return all correspondence co	ncerning this matt	er to the following:		
	Romua	ldo Lamber	4	
	227N	W13 Aur.	OCP_	
Firm/Company  2023 Route 70W Suite!				
CI		City/ State and Zip Code		
E-mail a	Ched	Ford O 10 d for future annual report	imbertis, com notification)	
For turther information concerning	this matter, please	reall:	10602 7602	
Name of Contact Pe	rson	at ( <u>0.500</u> Area Coo	de & Daytime Telephone Number	
Enclosed is a check for the following amount made payable to the Florida Department of State:				
	75 Filing Fee & Teate 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 Sect Division of Corp P.O. Box 6327 Tallahassec, FL.	ion orations	Amend Divisio The Co	Address ment Section n of Corporations entre of Tallahassee N. Monroe Street, Suite 810	

Tallahassee, FL 32303

## Articles of Amendment

	to				
Artic	cles of Incor	poration		<i>t</i> ~	
	υf	4	_	r- ,	LED
227 1111	1 13	HIT	DOD.	2024 APR	2
(Name of Corporation as	s currently f	iled with the Flo	orida Dept.	of State)	2 PH 12: 24
Pigno	m 7	21410		17.	12.24
(Dayman)	Sumbor of C	Componentian (it lea	.cum)		
(Document)	Number of C	Torporation (if kn	own)		$f(H_{i},x)$
Pursuant to the provisions of section 607,1006, Florida Statits Articles of Incorporation:	utes, this <i>Fl</i> e	orida Profit Corp	<i>ooration</i> ado	pts the followin	g amendment(s) to
A. If amending name, enter the new name of the corpor	ration:				
					The new
name must be distinguishable and contain the word "corpor "Inc.," or Co.," or the designation "Corp." "Inc.," or "chartered," "professional association," or the abbreviati	"Co". A p	npany," or "inco professional corp	rporated" o poration nar	r the abbreviatione must contai	on "Corp.," n the word
B. Enter new principal office address, if applicable:		2023	Route	70 Wes	$\lesssim t$
(Principal office address MUST BE A STREET ADDRES	<u>SS</u> )				
		Cherry 2023	H111	NJO	8002
C. Enter new mailing address, if applicable:		20-0	0 1	. <del>- 2-</del> 2	<i>L</i> -
(Mailing address MAY BE A POST OFFICE BOX)		0023	KOUK	10 W	<u>est</u>
		SUI	te1		
		Cherry		4250	6007
		<u>C/0// C</u>	PHII	7050	<u> </u>
D. If amending the registered agent and/or registered o	office addres	s in Florida, ent	ter the name	of the	
new registered agent and/or the new registered offic				<del></del>	
La Panis	alda	Lumber	L		
	`		•		-
300 S Pa	<u> 2111K Di</u>	IUC Uni	<u> +240.</u>	5	_
1/1	Florida street	address)			_
New Registered Office Address:	GMI			Florida 3	3139
New Registered Office radioess.	(()	ity)	·	(Zip )	Code)
		•			
New Registered Agent's Signature, if changing Register	red Agent:				
I hereby accept the appointment as registered agent. I am		h and accept the	obligations	of the position.	
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$\mathcal{M}$	11-				
$\leftarrow \mathcal{A}$	7/				_
Signature	of New Reg	istered Agent, if	changing		-

Check if applicable 
\$\mathbb{F}\! 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 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> <u>John</u>	Doe	
X Remove	<u>V</u> <u>Mike</u>	<u>Jones</u>	
X Add	<u>SV</u> <u>Sally</u>	Smith	
Type of Action (Check One)	<u>Title</u>	Name	Address
1) Change	Secretary	Preno Ruggeri	1680Michigan Acenve
Add Remove	)	_	Sui K7-00 Miam i FL 33139
2) Change	<u> 1P</u>	Ilya Karaliou	931 NE 107Th BScarne Port
Add			MIOMI FL 33161
Remove Change			
Add			
Remove			
4) Change			
Add			
Remove			
5) Change			
Add			
Remove			
6) Change	<del></del>		
Add			
Remove			

<u>f amending or ad</u> Attach <i>additional s</i>	ding additional Ar sheets, if necessary).	<u>ticles, enter cha</u> . <i>(Be specific)</i>	nge(s) here:			
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			<b>6</b>		ad a harm	
provisions for in	provides for an ex aplementing the ar	<u>nendment if not</u>	contained in th	e amendment i	tself:	
(if not applic	able, indicate N/A)					
10/			<del>-</del>		<del></del>	<u>_</u>
NA	<b>.</b>					<del> </del>
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<del>_</del>		<u>.                                      </u>		<del>-</del>		

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The date of each amendment(s) ado	ntion: 3/21/2024	, if other than the
the date of each amendment(s) ado date this document was signed.		
ore at a day if anythophlar	3/21/2024	
Effective date <u>if applicable</u> :	(no more than 90 days after amendn	nent file date)
Note: If the date inserted in this blo document's effective date on the Department.	ck does not meet the applicable statutory filing artment of State's records.	g requirements, this date will not be listed as the
Adoption of Amendment(s)	( <u>CHECK ONE</u> )	
The amendment(s) was/were adop action was not required.	ted by the incorporators, or board of directors w	ithout shareholder action and shareholder
☐ The amendment(s) was/were adop by the shareholders was/were suff	ted by the shareholders. The number of votes ca icient for approval.	ast for the amendment(s)
☐ The amendment(s) was/were appromust be separately provided for e	oved by the shareholders through voting groups, ach voting group entitled to vote separately on t	. The following statement the amendment(s):
"The number of votes cast fo	or the amendment(s) was/were sufficient for app	proval
by		
	(voting group)	
Dated		
(By a dir	ector, president or other officer - if directors or by an incorporator – if in the hands of a receive	officers have not been
	d fiduciary by that fiduciary)	T, trustee, or other court
	Romvaldo Lamb	erhi
	(Typed or printed name of person sign	ning)
	President	
-	(Title of person signing)	