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COVER LETTER

TO: Amendment Section

Division of Corporations

MiAMI INC DOCUMENT NUMBER: 719000 9311 The enclosed Articles of Amendment and fee are submitted for filing. Please return all correspondence concerning this matter to the following: MANIANA GIMA Firm/ Company 7261 SW 55 AVE Address m' A m' - MONDA - 33/43

City/ State and Zip Code MAMANA (MAMAMAMIAMI. WM
E-mail address: (to be used for future annual report notification) For further information concerning this matter, please call: MIKE VA WET at 305, 7 613423

Name of Contact Person Area Code & Daytime Telephone Number Enclosed is a check for the following amount made payable to the Florida Department of State: ☐ \$35 Filing Fee ☐\$43.75 Filing Fee & ☐\$43.75 Filing Fee & □\$52.50 Filing Fee Certificate of Status Certified Copy Certificate of Status Certified Copy (Additional copy is enclosed) (Additional Copy is enclosed) **Mailing Address** Street Address Amendment Section Amendment Section Division of Corporations Division of Corporations P.O. Box 6327 The Centre of Tallahassee 2415 N. Monroe Street, Suite 810 Tallahassee, FL 32314

Tallahassee, FL 32303

Articles of Amendment to Articles of Incorporation

of

MAMANA LIMA IN	C
(Name of Corporation as currently	filed with the Florida Dept. of State)
P190000 9311	7
(Document Number of	Corporation (if known)
Pursuant to the provisions of section 607.1006, Florida Statutes, this F its Articles of Incorporation:	lorida Profit Corporation adopts the following amendment(s) to
A. If amending name, enter the new name of the corporation:	
MAMANA MAMI PA	The new
name must be distinguishable and contain the word "corporation," "co "Inc.," or Co.," or the designation "Corp." "Inc." or "Co". A "chartered," "professional association," or the abbreviation "P.A."	mpany," or "incorporated" or the abbreviation "Corp"
B. Enter new principal office address, if applicable:	7261 SW 55 ALE
(Principal office address <u>MUST BE A STREET ADDRESS</u>)	7261 SW 55 ALE mam - FLOW DA , 33/43
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)	
D. If amending the registered agent and/or registered office address: Name of Nam Pagintaged, transf.	ss in Florida, enter the name of the
Name of New Registered Agent	7
(Florida stree	
New Registered Office Address:	Florida 2
	ity) (Zip Code)
New Registered Agent's Signature, if changing Registered Agent:	
I hereby accept the appointment as registered agent. I am familiar wi	th and accept the obligations of the position.
Signature of New Reg	ristered Agent, if changing

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, Treusurer, 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 <u>PT</u> John Doe ٧ X Remove Mike Jones <u>X</u> Add SV Sally Smith Type of Action _Title Address Name (Check One) 1) ____ Change ___ Add ___ Remove 2) ____ Change ____ Add Remove 3) ____ Change ___ Add __ Remove 4) ____ Change ____ Add __ Remove 5) ____ Change

Page 2 of 4

E. If amending or adding additional Articles, enter change(s) here:

(Attach additional sheets, if necessary). (Be specific)

Add

6) ____ Change

__ Add

_ Remove

__ Remove

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		Page	3 of 4		
e date of each amended this document was:					, if other that
fective date <u>if applic</u>	able:				
a date it applies	<u>-</u> -	(no more than	90 days after amer	ndment file date)	

Note: If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as the document's effective date on the Department of State's records.

Adoption of Amendment(s)	(CHECK ONE)			
The amendment(s) was/were adopted by the shareholders. The number of votes cast for the amendment(s) by the shareholders was/were sufficient for approval.				
	by the shareholders through voting groups. The following statement ofting 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/were adopted b action was not required.	y the board of directors without shareholder action and shareholder			
∑ The amendment(s) was/were adopted b action was not required.	y the incorporators without shareholder action and shareholder			
Dated TCC/2	17/20/9 1 Alim Amy Bolima			
Signature // A li Am W Com mo				
(By a director, president or other officer—if directors or officers have not been				
selected, by an incorporator – if in the hands of a receiver, trustee, or other court appointed fiduciary by that fiduciary)				
	MANUA CAMTOS BAN BOSA G MA (Typed or printed name of person signing)			
(Typed or printed name of person signing)				
Di ME CTUR				
(Title of person signing)				
(Title	or berson signing)			