P20000001768

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COVER LETTER

TO: Amendment Section Division of Corporations

Tallahassee, FL 32314

NAME OF CORPOR	RATION: ASAP GLOBAL C	ORP		
DOCUMENT NUME			. <u></u>	
	of Amendment and fee are su	bmitted for filing.		
Please return all corres	spondence concerning this ma	tter to the following:		
	ORLANDO PARDO ORTEG	ĩA		
		Name of Contact Persor	1	
ASAP GLOBAL CORP				
Firm/ Company				
	9612 SW 145 PLACE			
		Address		
	MIAMI, FL 33186			
City/ State and Zip Code		2028 SEC T.		
	dre1951@hotmail.com			ALL ALL
	-	sed for future annual report	notification)	AF R 2
For further information	n concerning this matter, pleas	se call: 786	339-5825	2023 MAR 23 AM 7: 00 SECRETARY OF STATE TALLAHASSEE, FL
Name o	of Contact Person) de & Daytime Telephone Nun	
Enclosed is a check fo	r the following amount made			
■ \$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 C	Address Iment Section on of Corporations entre of Tallahassee N. Monroe Street, Suite 810)

Tallahassee, FL 32303

Articles of Amendment to Articles of Incorporation of

ASAP GLOBAL CORP			
(Name of Corporation	on as currently filed with the	Florida Dept. of State)	
P20000001768			
(Docum	nent Number of Corporation (if	known)	
Pursuant to the provisions of section 607.1006, Florida its Articles of Incorporation:	Statutes, this <i>Florida Profit C</i>	orporation adopts the following am	endment(s) to
A. If amending name, enter the new name of the co	orporation:		
		The	r new
name must be distinguishable and contain the word "co "Inc.," or Co.," or the designation "Corp," "Inc," "chartered," "professional association," or the abbre	" or "Co". A professional c	corporated" or the abbreviation "C	Corp., "
B. Enter new principal office address, if applicable			
(Principal office address <u>MUST BE A STREET ADD</u>	<u>ORESS</u>)	<u>w</u> m ,	202
		200	2023 MAR
			2
C. Enter new mailing address, if applicable:		\$8×	3
(Mailing address <u>MAY BE A POST OFFICE BO</u>	<u></u>	<u> </u>	<u> </u>
		ੁ ^{ਦਾ} ਨ ਜਾਣ	
			00
D. If amending the registered agent and/or register new registered agent and/or the new registered of		enter the name of the	
Name of New Registered Agent			
	(Florida street address)		
New Registered Office Address:		. Florida	
	(City)	(Zip Code)	
Nam Designand Agent's Construe if shousing Design	Enterment Amounts		
New Registered Agent's Signature, if changing Reg I hereby accept the appointment as registered agent.		he obligations of the position.	
Siyna	uure of New Registered Agent,	if changing	

Check if applicable

 \Box 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>	John Doe	
X Remove	\underline{V}	Mike Jones	
X Add	<u>sv</u>	Sally Smith	
Type of Action (Check One)	<u>Title</u>	<u>Name</u>	Address
) Change	VTS	MARIA N GARCIA	9612 SW 145 PLACE
X Add			MIAMI, FL 33186
Remove			023 M
2) Change		_	MAR 23
Add			
Remove Change			EE. FI.
Add			mi ————————————————————————————————————
Remove			
4) Change			
Add			
Remove			
51 Change		_	· · · · · · · · · · · · · · · · · · ·
Add			
Remove			
6) Change		_	
Add			
Remove			

E. If amending or adding additional Articles, enter change(s) here: (Attach additional sheets, if necessary). (Be specific)	
	
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	STATE STATE
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F. If an amendment provides for an exchange, reclassification, or cancellation of issued sl	iares,
provisions for implementing the amendment if not contained in the amendment itself: (if not applicable, indicate N/A)	
(у ногиррисите, также кум)	
	
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The date of each amendment(s) adoption:	, if	other tl	nan the
date this document was signed. 3/20/2023			
Effective date if applicable: (no more than 90 days after amendment file date)			
Note: If the date inserted in this block does not meet the applicable statutory filing requirements, this date document's effective date on the Department of State's records.	will not b	e listed	as the
Adoption of Amendment(s) (CHECK ONE)			
The amendment(s) was/were adopted by the incorporators, or board of directors without shareholder action action was not required.	and sharel	rolder	
☐ 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.			
☐ The amendment(s) was/were approved by the shareholders through voting groups. The following statement must be separately provided for each voting group entitled to vote separately on the amendment(s):			
"The number of votes cast for the amendment(s) was/were sufficient for approval	SEC OBS	2023 MAR 2	
by" (voting group)	REI REI	MA	
(voting group)	套景	₹23	14.4401
Dated 3/20/2023 Signature Emiliano Pag	EORETARY OF ST TALLAHASSEE, F	8 AM 7: 00	
Signature Emiliano Pag	J. A.	00	
(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)			
EMILIANO PEREZ			
(Typed or printed name of person signing)			
INCORPORATOR/TAX PREPARER			
(Title of person signing)			