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## COVER LETTER

TO: Amendment Section Division of Corporations

NAME OF CORPOR	RATION: ORGA ENTYERF	PRISES CORP.	
DOCUMENT NUMI	BER:		<u> </u>
The enclosed Articles	of Amendment and fee are su	bmitted for filing.	
Please return all corres	spondence concerning this ma	tter to the following;	
	Nicole Ortiz Gallegos		
		Name of Contact Person	1
	Orga Enterprises Corp.		
		Firm/ Company	
	7335 Spring Hill DR.		
	<del></del> -	Address	
	Spring Hill, FL 34606		
		City/ State and Zip Code	
	nogallegos25@gmail.com		
	E-mail address: (to be us	sed for future annual report	notification)
For further information	n concerning this matter, pleases	402	904-0392
Name of Contact Person		at ( Area Coo	) de & Daytime Telephone Number
	r the following amount made		
☐ \$35 Filing Fee	■\$43.75 Filing Fee & Certificate of Status	S43.75 Filing Fee & Certified Copy (Additional copy is enclosed)	S52.50 Filing Fee Certificate of Status Certified Copy (Additional Copy is enclosed)
And Divi P.O.	ling Address endment Section sion of Corporations Box 6327 ahassee, FL 32314	Amend Divisio The Ce 2415 N	Address ment Section n of Corporations entre of Tallahassee N. Monroe Street, Suite 810 assee, FL 32303

## Articles of Amendment Articles of Incorporation $\mathbf{of}$

Check if applicable

☐ The amendment(s) is/are being filed pursuant to s. 607.0120 (11) (e), F.S.

ORGA ENTERPRISES CORP.		
(Name of Corporation as currently)	iled with the Florida Dept. of State)	
P20000013896		
(Document Number of C	Corporation (if known)	
Pursuant to the provisions of section 607,1006, Florida Statutes, this $FI$ its Articles of Incorporation:	orida Profit Corporation adopts the following amendm	ent(s) to
A. If amending name, enter the new name of the corporation:		
	The nev	e
name must be distinguishable and contain the word "corporation," "con "Inc.," or Co.," or the designation "Corp," "Inc," or "Co". A p "chartered," "professional association," or the abbreviation "P,A,"	npany," or "incorporated" or the abbreviation "Corp.,	.,
B. Enter new principal office address, if applicable: (Principal office address <u>MUST BE A STREET ADDRESS</u> )		
C. Enter new mailing address, if applicable: (Mailing address <u>MAY BE A POST OFFICE BOX</u> )		
D. If amending the registered agent and/or registered office addressiness registered agent and/or the new registered office address:	ss in Florida, enter the name of the	
Name of New Registered Agent		
(Florida stree	address)	
New Registered Office Address:	, Florida	
	(Zip Code)	
New Registered Agent's Signature, if changing Registered Agent: I hereby accept the appointment as registered agent. I am familiar wit	th and accept the obligations of the position.  AR  6	SEURI JAR JIVISION OFI
Company Company		- 결혼년 건설
Signature of New Reg	istered Agent, if changing	.3

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.

Example: XChange	<u> 14</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>	<u>Addres</u> s
1) Change	٧	LOURDES ORTIZ GALLEGOS	7335 SPRING HILL DR
X Add			SPRING HILL, FL 34606
Remove			
2) Change			
Add			
Remove 3 ) Change			
Add			
Remove			
4) Change		_	
Add			
Remove			
5) Change			
Add			
Remove			
6) Change			
Add			
Remove			

Attach additional shee	g additional Arti ts, if necessary).	(Be specific)				
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f an amendment pro- provisions for implei	vides for an exch	iange, reclassif	ication, or can	cellation of issu	ed shares,	
(if not applicable,	, indicate N/A)	nament ii not i	ontained in th	e amenument i	isen.	
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MARCH 13, 2020 The date of each amendment(s) adoption: \_\_ date this document was signed. MARCH 13, 2020 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 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 incorporators, or board of directors without shareholder action and shareholder action was not required. ☐ 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 (voting group) MARCH 13, 2020 Dated Signature ' (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) NICOLE ORTIZ GALLEGOS (Typed or printed name of person signing) **PRESIDENT** (Title of person signing)