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COVER LETTER

TO: Amendment Section Division of Corporations

NAME OF CORPO	RATION: SUN FUN DELIV	ERY CORPORATION		
	BER: P20000022570			
	of Amendment and fee are su	bmitted for filing.		
Please return all corre	spondence concerning this ma	tter to the following:		
	CLARIBEL LOPEZ			
		Name of Contact Person		
	SUN FUN DELIVERY COR	PORATION		
		Firm/ Company		
	27716 SW 132ND CT	•		
		Address		
	HOMESTEAD, FL 33032			
		City/ State and Zip Code		
	alfonso925@att.net		•	
	•	sed for future annual report	notification)	
For further information	on concerning this matter, pleas	se call: at (6248100	
Name	of Contact Person	Area Code & Daytime Telephone Number		
Enclosed is a check f	or the following amount made	payable to the Florida Depa	artment of State:	
S35 Filing Fee	☐\$43.75 Filing Fee & Certificate of Status	☐\$43.75 Filing Fee & Certified Copy (Additional copy is enclosed)	S52.50 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		Street Address Amendment Section Division of Corporations The Centre of Tallahassee 2415 N. Monroe Street, Suite 810		

Tallahassee, FL 32303

Articles of Amendment to Articles of Incorporation of

Сī	IN	DUIN	DEL	IMERY	CORPOR	ATION
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s Florida Profit Corporation adop	pts the following	amendment(s) to
		The new
		n "Corp"
CLARIBEL LOPEZ		
27716 SW 132ND CT		- CD
HOMESTEAD, FL 33032	• *	77
	OV 12 A	LED
dress in Florida, enter the name	.5-	
treet address)		
	Florida	·
(City)	τειρ υ	oge)
n <u>t:</u> with and accept the obligations o	of the position.	
Registered Agent, if changing		
	A professional corporation nan CLARIBEL LOPEZ 27716 SW 132ND CT HOMESTEAD, FL 33032 dress in Florida, enter the name ss: (City) tt: with and accept the obligations of	CLARIBEL LOPEZ 27716 SW 132ND CT HOMESTEAD, FL 33032 Page 12 Page 1

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)

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>	<u>Addres</u> s			
1) Change	P	ROCIO J AVALOS	158 NORMANDY DR			
Add X Remove			TAVERNIER, FL 33070			
Remove 2) Change	P	CLARIBEL LOPEZ	27716 SW 132ND CT			
X Add			HOMESTEAD, FL 33032			
Remove 3) Change						
Add						
Remove						
4) Change						
Add						
Remove						
51 Change						
Add						
Remove						
6) Change						
Add						
Remaye						

Attach additional sheets, if necessary).	cles, enter chan (Be specific)				
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provisions for implementing the ame	<u>ndment if not c</u>	omtameu m en <u>e a</u>			
f an amendment provides for an exception provisions for implementing the ame (if not applicable, indicate N/A)	<u>ndment if not c</u>	omamed in che a			
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• •	09/04/2020	
The date of each amendment(s) ad date this document was signed.	option:	, if other than the
09/0-	/2020	
Effective date <u>if applicable</u> :	(no more than 90 days after am	endment file date)
Note: If the date inserted in this bl document's effective date on the De		filing requirements, this date will not be listed as the
Adoption of Amendment(s)	(<u>CHECK ONE</u>)	
The amendment(s) was/were adopaction was not required.	nted by the incorporators, or board of directo	ors without shareholder action and shareholder
☐ The amendment(s) was/were ado by the shareholders was/were su	oted by the shareholders. The number of vot ficient for approval.	tes cast for the amendment(s)
☐ The amendment(s) was/were app must be separately provided for	roved by the shareholders through voting gropeach voting group entitled to vote separately	oups. The following statement on the amendment(s):
"The number of votes cast	or the amendment(s) was/were sufficient for	r approval
by	(voting group)	···
	(voting group)	
09/04/2020 Dated	For a ha	
Signature		
	rector, president or other officer – if director, , by an incorporator – if in the hands of a rec	
	ed fiduciary by that fiduciary)	
	ROCIO J AVALOS	
	(Typed or printed name of person	signing)
	PRESIDENT	

(Title of person signing)