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S. YOUNG

COVER LETTER

TO: Amendment Section Division of Corporations

NAME OF CORPO	RATION: NIZZA HOME CO	DRP				
DOCUMENT NUM	BER: P20000023683					
	of Amendment and fee are sul	bmitted for filing.				
Please return all corre	spondence concerning this ma	tter to the following:				
	JOSE YGNACIO PEREZ					
		Name of Contact Persor	1			
	NIZZA HOME CORP					
		Firm/ Company				
	3956 INVESTMENT LN UN	VIT A-3				
		Address				
	WEST PALM BEACH,FL.33	3404				
	•	City/ State and Zip Code				
	info@nizzahome.com					
	E-mail address: (to be us	sed for future annual report	notification)			
For further informatic	on concerning this matter, pleas	se call:				
Jose Ygnacio Perez		786 at (580-8305			
Name	of Contact Person	Area Co	de & Daytime Telephone Number			
Enclosed is a check for	or the following amount made	payable to the Florida Depa	artment of State:			
S35 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)			
Am Div	iling Address endment Section ision of Corporations Box 6327	Amend Divisio	Address Iment Section on of Corporations entre of Tallahassee			

Tallahassee, FL 32314

2415 N. Monroe Street, Suite 810

Tallahassee, FL 32303

Articles of Amendment to Articles of Incorporation of

NIZZA HOME CORP

Check if applicable

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

(Name o	f Corporation as currentl	y filed with the Florida Dept. of State)		
P20000023683				
	(Document Number of	f Corporation (if known)		
Pursuant to the provisions of section 607. its Articles of Incorporation:	1006, Florida Statutes, this	Florida Profit Corporation adopts the following amendmen	t(s) to	
A. If amending name, enter the new na	ime of the corporation:			
N/A		The new		
name must be distinguishable and contain "Inc.," or Co.," or the designation "Contrartered," "professional association,"	Corp." "Inc," or "Co". 7	company," or "incorporated" or the abbreviation "Corp.," A professional corporation name must contain the word		
B. Enter new principal office address,	if annlicable:	3956 Investment Ln Unit A-3		
(Principal office address MUST BE A S		West Palm Beach, Fl. 33404		
C. Enter new mailing address, if apple (Mailing address MAY BE A POST)		3956 Investment Ln Unit A-3		
		West Palm Beach, Fl, 33404		
		.?		
D. If amending the registered agent ar new registered agent and/or the new			:	
Name of New Registered Agent	Jose Ygnacio Perez	23	₩ 94	
nume of New Registered Agent	4250 Biscayne Boulevard	Apt 402	<u> </u>	
	tFlorida str	reet address)	±	
New Registered Office Address:	MIAMI	, Florida 33137 ==		
		(City) (Zip Code)		
New Registered Agent's Signature, if c I hereby accept the appointment as regist		: with and accept the obligations of the position.		
do	e U. Pere	egistered Agent, if changing		
- }	Signature of New R	egistered 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, 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: X Change	<u> </u>	John Doe	
X Remove	<u>V</u>	Mike Jones	
X Add	<u>sv</u>	Sally Smith	
Type of Action (Check One)	<u>Title</u>	Name	Address
1) Change	p	JUAN A SANCHEZ	4250 Biscayne Boulevard Apt 402
Add			Miami, Fl,33137
X Remove			<u></u>
2) Change	P	JOSE YGNACIO PEREZ	4250 Biscayne Boulevard Apt 402
X Add			Miami, Fl.33137
Remove 3) Change			
Add			
Remove			
4) Change			
Add			
Remove			
5) Change			· · · · · · · · · · · · · · · · · · ·
Add			
Remove			
6) Change			
Add			
Remove			

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If an amendmen	it provides for an	exchange, re	eclassification	ı, or cancellati	on of issued shar	res,	
provisions for i	mplementing the	<u>amendment</u>	if not contain	ed in the ame	ndment itself:		
(if not appli	icable, indicate N/	'A)					
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The date of ea	11/17/2020 ch amendment(s) adoption:	, if other than the
	nent was signed.	-
	11/17/2020	
Effective date	if applicable: (no more than 90 days after amendment file date)	
	(no more than 90 days after amenament file date)	
	ate inserted in this block does not meet the applicable statutory filing requirements, this date will ective date on the Department of State's records.	not be listed as the
Adoption of A	mendment(s) (CHECK ONE)	
	ment(s) was/were adopted by the incorporators, or board of directors without shareholder action and not required.	shareholder
	nent(s) was/were adopted by the shareholders. The number of votes cast for the amendment(s) cholders was/were sufficient for approval.	
must be sep	ment(s) was/were approved by the shareholders through voting groups. The following statement parately 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	
by _	(voting group)	
,	(voting group)	
	11/17/2020	
	11/17/2020 Dated	
	Signature 102e 1 - Perez . (By a director, president or other officer – if directors or officers have not been	
	(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)	
	Jose Ygnacio Perez	
	(Typed or printed name of person signing)	
	OFFICER/DIRECTOR/PRESIDENT	
	(Title of person signing)	