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2/26/21

		COVER LETTER		
TO: Amendment Sect Division of Corpo			-l e	
NAME OF CORPOR	RATION: LAVES A	ito Deals (Lorp.	
DOCUMENT NUME	BER: P20000	49090		
The enclosed Articles	of Amendment and fee are su	bmitted for filing.		
Please return all corres	spondence concerning this ma	tter to the following:		
	DAVI	2 CERATZI	+	
		Name of Contact Person		
		Firm/ Company		
	4028 NAVIGATOR WAY KISSIMMER PI, 34746			
	Klssimn	Address 3	4746	
	City/ State and Zip Code			
	E-mail address: (to be us	sed for future annual report	MAIL WM notification)	
For further information concerning this matter, please call:				
6 MACT	ESPAMA	at (407	,5085357	
Name o	of Contact Person		de & Daytime Telephone Number	
Enclosed is a check for the following amount made payable to the Florida Department of State:				
\$35 Filing Fee	☐S43.75 Filing Fee & Certificate of Status	S43.75 Filing Fee & Certified Copy (Additional copy is enclosed)	☐\$52.50 Filing Fee Certificate of Status Certified Copy (Additional Copy is enclosed)	
	ling Address endment Section		Address Iment Section	

Division of Corporations

Tallahassee, FL 32303

The Centre of Tallahassee 2415 N. Monroe Street, Suite 810

Division of Corporations

Tallahassee, FL 32314

P.O. Box 6327

Articles of Amendment

Articles of Incorporation

(Name of Corporation as currently filed with the Flofiffa Dept./of State) STATE TALLAHASSEE, ÉÉ (Document Number of Corporation (if known) Pursuant to the provisions of section 607,1006, Florida Statutes, this Florida Profit Corporation adopts the following amendment(s) to its Articles of Incorporation: A. If amending name, enter the new name of the corporation: name must be distinguishable and contain the word "corporation," "company," or "incorporated" or the abbreviation "Corp.," "Inc.," or Co.," or the designation "Corp," "Inc," or "Co". A professional corporation name must contain the word "chartered," "professional association," or the abbreviation "P.A." B. Enter new principal office address, if applicable: (Principal office address MUST BE A STREET ADDRESS) 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 in Florida, enter the name of the new registered agent and/or the new registered office address: Name of New Registered Agent (Florida street address) New Registered Office Address: New Registered Agent's Signature, if changing Registered Agent: hereby accept the appointment as registered agent. I am familiar with and accept the obligations of the position. Signature of New Registered Agent, if changing

eck 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.

Example:

X Change	PT John Doe		
X Remove	<u>V</u> <u>Mike Jones</u>		
X Add	SV Sally Smith		
Type of Action (Check One)	Title Name		Address
1) Change	SV ALAIN Och	09 Alvarez L	1305 COUNTRY hills Blu
X Add		7	PANT CITY F1, 33363
Remove		_	·
2)Change			<u> </u>
Add		_	
Remove Change			
Add		_	
Remove		-	
) Change			
Add		-	
Remove		_	
Change			
Add		~	
Remove		_	
_ Change			
_ Add		_	
Remove			

tach additional sheets, if necessary).	(Be specific)
	
	
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in amendment provides for an exch	nange, reclassification, or cancellation of issued shares,
(if not applicable, indicate N/A)	endment if not contained in the amendment itself:
(7)	

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	loption:	, if other than the
date this document was signed.		
Effective date if applicable:		
	(no more than 90 days after amendment file dat	(c)
Note: If the date inserted in this b document's effective date on the De	lock does not meet the applicable statutory filing requireme partment of State's records.	nts, this date will not be listed as the
Adoption of Amendment(s)	(<u>CHECK ONE</u>)	
The amendment(s) was/were addaction was not required.	pted by the incorporators, or board of directors without share	cholder action and shareholder
☐ The amendment(s) was/were add by the shareholders was/were su	pted by the shareholders. The number of votes east for the a fficient for approval.	mendment(s)
	roved by the shareholders through voting groups. The follow each voting group entitled to vote separately on the amendm	
"The number of votes cast	for the amendment(s) was/were sufficient for approval	
by	······································	
	(voting group)	
DatedO\ -	13-2021	
Signature	4	·
	ector, president or other officer - if directors or officers hav	
selectă annoint	f. by an incorporator – if in the hands of a receiver, trustee, or ed fiduciary by that fiduciary)	r other court
арронн	ed trade ary by that fiduciary)	
	JANA ESPARZA	
	(Typed or printed name of person signing)	
	gresidem.	
	(Title of person signing)	