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COVER LETTER

TO: Amendment Section Division of Corporations

NAME OF CORPORATION:	Art Corp			
DOCUMENT NUMBER: PZCCCCC	{			
The enclosed Articles of Amendment and fee are subn	nitted for filing.			
Please return all correspondence concerning this matte	er to the following:			
Carlos	Name of Contact Person Art Corp Firm/ Company			
	Firm/ Compuny			
9874	Hannocks Blud, 103			
Miani	City/ State and Zip Code			
E-mail address: (to be used	d for future annual report notification)			
For further information concerning this matter, please	call:			
Cadas A Valdivieso, So Name of Contact Person	at (\ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \			
Enclosed is a check for the following amount made pa	yable to the Florida Department of State:			
☐ \$35 Filing Fee ☐ \$43.75 Filing Fee & Certificate of Status	S43.75 Filing Fee & Certified Copy (Additional copy is enclosed) 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

FILED

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Niveloso Act C	OP	2020 OCT -5 PM 1.50
(Name of Corporation a	s currently filed with	the Florida Dept. of State)
P200004977	^	SECRETARY OF STATE
	✓ Number of Corporation	on (if known)
(150camen	runner or corporation	in the vary
rsuant to the provisions of section 607,1006. Florida Sta Articles of Incorporation:	itutes, this <i>Florida Pro</i>	fit Corporation adopts the following amendment
If amending name, enter the new name of the corpo	oration:	
<u></u>	·	The new
ime must be distinguishable and contain the word "corpo Inc.," or Co.," or the designation "Corp," "Inc," or chartered," "professional association," or the abbreviat	"Co". A profession	or "incorporated" or the abbreviation "Corp.," all corporation name must contain the word
Enter new principal office address, if applicable:		
rincipal office address <u>MUST BE A STREET ADDRE</u>	<u>(SS</u>)	

Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)		
(Muning address MAT BE A 1031 OT FICE BOX)		
	-	
. If amending the registered agent and/or registered		ida, enter the name of the
	ce a <u>ddress:</u>	
new registered agent and/or the new registered office		
Name of New Registered Agent Name of New Registered Agent		
Name of New Registered Agent		
Name of New Registered Agent	(Florida street address)	
Name of New Registered Agent	(Florida street address)	, Florida
-		
Name of New Registered Agent	(Florida street address) (City)	, Florida(Zip Code)
Name of New Registered Agent		
Name of New Registered Agent New Registered Office Address:	(City)	
Name of New Registered Agent New Registered Office Address: ew Registered Agent's Signature, if changing Registe	(City)	(Zip Code)
Name of New Registered Agent	(City)	(Zip Code)
Name of New Registered Agent New Registered Office Address: ew Registered Agent's Signature, if changing Registe	(City)	(Zip Code)
Name of New Registered Agent New Registered Office Address: ew Registered Agent's Signature, if changing Registe	(City)	(Zip Code)
Name of New Registered Agent New Registered Office Address: ew Registered Agent's Signature, if changing Registerely accept the appointment as registered agent. I an	(City)	(Zip Code) sept the obligations of the position.

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.

Example: X_Change	<u>PT</u> <u>Joh</u>	n Doe	
X Remove	<u>V</u> <u>Mil</u>	ke Jones	
X Add	<u>SV</u> <u>Sall</u>	ly Smith	
Type of Action (Check One)	Title	Name	Address
1) Change	P	Jeiner Tirado	14342 SW 158th St.
Add			Miami, FL 33177
Remove			
2) Change			
Add			
Remove Change			
Add			
Remove			
4) Change			
Add			
Remove			
5) Change			
Add			
Remove			
6) Change			
Add			
Remove			

f an amendment provides for an exchange, reclassification, or cancellation of issued shares, provisions for implementing the amendment if not contained in the amendment itself: (if not applicable, indicate N/A)	Attach additional she	ng additional Art rets, if necessary).	(Be specific)	angeta) here.			
f an amendment provides for an exchange, reclassification, or cancellation of issued shares, provisions for implementing the amendment if not contained in the amendment itself: (if not applicable, indicate N/A)							
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provisions for implementing the amendment if not contained in the amendment itself:							
provisions for implementing the amendment if not contained in the amendment itself:	<u>f an amendment pr</u>	ovides for an exc	hange, reclassi	fication, or ca	ncellation of i	ssued shares,	
(у пот аррисавіе, такаї в мл.)	provisions for imple	ementing the am	endment if not	contained in	the amendme	nt i <u>tself:</u>	
	(у погаррисаот	e, maicale NA)					
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The date of each amendment(s) adoption:
Effective date if applicable:
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 a 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
by" (voting group)
(voting group)
Dated 10/01/2020 Signature (By addirector, 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)
(Typed or printed name of person signing)
(Title of person signing)

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