P20000060984

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COVER LETTER

TO: Amendment Section
Division of Corporations

NAME OF CORPORATION:	Princesse	Kingdom Con	-p	
NAME OF CORPORATION:	P20000	060984	·	
The enclosed Articles of Amend	ment and fee are su	bmitted for filing.		
Please return all correspondence	concerning this ma	tter to the following:		
	A_	Pestano Name of Contact Person	n	
		BSSN		
		Firm/ Company		
	44	Address	TUS Rd	
		•		
	Sc	City/ State and Zip Cod	33351	
		City/ State and Zip Cod	e	
E-ma For further information concerni		sed for future annual report	notification)	
A Pestan	10	at (954	578-0016	
A Pestavo at (954) Name of Contact Person Area Code &		de & Daytime Telephone Number		
Enclosed is a check for the follo-	ving amount made	payable to the Florida Dep.	artment of State:	
•	3.75 Filing Fee & tifficate 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			Address Iment Section	
Division of Co	rporations	Division of Corporations		
P.O. Box 6327 Tallahassee, F			entre of Tallahassee N. Monroe Street, Suite 810	

Tallahassee, FL 32303

Articles of Amendment to Articles of Incorporation

FILED

2021 NOV 23 AM 10: 56 rently filed with the Florida DeptS&CSI&tEARY OF SILL TALLAHASSEE, PLOFIE <u> P200000 60984</u> (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 BUSINESSES SERVICES & Support Network Comp 4612 N. HIATUS Rd (Florida street address) New Registered Office Address: SUNVISE New Registered Agent's Signature, if changing Registered Agent: I hereby accept the appointment as registered agent. I am familiar with and accept 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.

X Change	<u>PT</u> <u>John</u>	1 Doe	
X Remove	<u>V</u> <u>Mik</u>	e Jones	
X Add	SV Sally	y Smith	
Type of Action (Check One)	<u>Title</u>	<u>Name</u>	<u>Addres</u> s
1) X Change	PS	JUAN A. Abuchaibe	15121 EAST WATER FORD D
Add			DAVIE FL 33331
Remove			
2) Change	D	Tierra Prometida	CR 43 99 50 LC 28
X _ Add		TRADING S.A.S.	CC MIRAMAR
Remove Change			BARAANQUILLA - Colombia
Add			
Remove			
4) Change			
Add			
Remove			
5) Change			
Add			
Remove			
6) Change			
Add			
Remove			

Attach <i>additi</i>	ional sheets, ij	f necessary).	cles, enter cha (Be specific)	·			
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f an amendi	ment nrovide	es for an eych	ange reclassif	ication, or can	cellation of issu	ed shares.	
provisions f	for implemen	iting the amei	ndment if not o	contained in th	e amendment i	tself:	
(if not a	applicable, ind	licate N/A)					
			•	•	•		
							· -

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The date of each amendment(s) adoption:
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 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)
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)
Tuau A. Abuchaibe (Typed or printed name of person signing)
Pres iDENT
(Title of person signing)

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