## P20000009792

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SECRETARY OF STATE
AND ANASSEE FLOOR

## COVER LETTER

TO: Amendment Section Division of Corporations

NAME OF COR	PORATION: CEANSAART CO	RPORATION	
DOCUMENT N	UMBER: P20000068782		
	icles of Amendment and fee are sub	omitted for filing.	
Please return all c	orrespondence concerning this mat	ter to the following:	
	ARTURO A MARTINEZ		
		Name of Contact Persor	1
	CEANSAART CORPORATI	ON	
		Firm/ Company	
	9705 COLLINS AVE		
		Address	
	N BAL HARBOR, FL 3315	4	
		City/ State and Zip Cod	c
	arturomart98@hotmail.com		
	E-mail address: (to be us	ed for future annual report	notification)
For further inform	nation concerning this matter, pleas	e call:	
ARTURO MAR'	TINEZ	at (	753-0608
Name of Contact Person		Area Co	de & Daytime Telephone Number
Enclosed is a che	ck for the following amount made p	payable to the Florida Dep	artment of State:
S35 Filing Fe	ee	S43.75 Filing Fee & Certified Copy (Additional copy is enclosed)	☐\$52.50 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	Ameno Divisio The C 2415 i	Address Iment Section on of Corporations entre of Tallahassee N. Monroe Street, Suite 810 assee, FL 32303

## Articles of Amendment to Articles of Incorporation

CEANSAART CORPORTION				≅s ≅	<b>20</b>	
(Name of Corpora	ation as currently	filed with the Florida Dep	t. of State)		~>	
P20000068782				£ñ	APR	П
(Doc	cument Number of	Corporation (if known)		S S	-8	
Pursuant to the provisions of section 607.1006, Flor	rida Statutae thic E	larida Profit Cornoration 2		( T)(		
its Articles of Incorporation:	rida Statutes, tilis F	oriuu r roju Corporunon a		•		
				윤글	<u>.</u>	
A. If amending name, enter the new name of the	e corporation:			.,	8	
N/A		•=			e new	
name must be distinguishable and contain the word "Inc.," or Co.," or the designation "Corp," "In "chartered," "professional association," or the abo	nc," or "Co". A	mpany," or "incorporated" professional corporation r	or the abbrev name must co	viation "( ontain th	Corp.," word	•
B. Enter new principal office address, if applica		N/A				
(Principal office address MUST BE A STREET A	DDRESS )					
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE I	BOX)	N/A				
(	<del></del> ,					
D. If amending the registered agent and/or regis	stand office addre	ce in Florida, antor the no	ma of the			
new registered agent and/or the new registered		ss in Florida, enter the na	inc or the			
N/A						
Name of New Registered Agent		<del></del>				
	(Florida stree	t address)				
New Registered Office Address:			_, Florida			
	/	Lity)	•	(Zip Code	;)	
New Registered Agent's Signature, if changing B I hereby accept the appointment as registered agen		th and accept the obligation	ns of the positi	ion.		
		•				
				<del></del>		
Si	ignature of New Re	gistered Agent, if changing				
Check if applicable						
☐ The amendment(s) is/are being filed pursuant to	s. 607.0120 (11) (c	), 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)

Example:

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 Doc	
X Remove	<u>V</u>	Mike Jones	
<u>X</u> Add	<u>SV</u>	Sally Smith	
Type of Action (Check One)	Title	<u>Name</u>	<u>Addres</u> s
1) X Change	VP	Vanesa Orozco	9705 COLLINS AVE #1501
Add			N BAL HARBOR, FL 33154
Remove			
2) Change			
Add			
Remove Change			
Add			
Remove			
4) Change			
Add			
Remove			
5) Change			
Add			
Remove			
6) Change			
Add			
Remove			

E. If amending or adding additional Articles, enter change(s) here: (Attach additional sheets, if necessary). (Be specific)		
N/A		
F. If 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)		
N/A		

	t.
The date of each amendment(s) adoption:	if other than the
date this document was signed.	
Effective date <u>if applicable</u> :	
	(no more than 90 days after amendment file date)
Note: If the date inserted in this block does document's effective date on the Department of	not meet the applicable statutory filing requirements, this date will not be listed as the of State's records.
Adoption of Amendment(s)	HECK ONE)
☐ The amendment(s) was/were adopted by th action was not required.	e incorporators, or board of directors without shareholder action and shareholder
☐ The amendment(s) was/were adopted by the by the shareholders was/were sufficient fo	e shareholders. The number of votes cast for the amendment(s) rapproval.
☐ The amendment(s) was/were approved by must be separately provided for each voting	the shareholders through voting groups. The following statement and group entitled to vote separately on the amendment(s):
"The number of votes cast for the am	endment(s) was/were sufficient for approval
by	n
(٧	oting group)
Dated 03/31	12022
(By a director, pr	esident or other officer – if directors or officers have not been acceptorator – if in the hands of a receiver, trustee, or other court
selected, by an ir appointed fiducit	ry by that fiduciary)
• •	MARTINEZ
	(Typed or printed name of person signing)
PRES	 
<del></del>	(Title of person signing)