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Certified Copies	_ Certificates	s of Status
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Office Use Only



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2021 JAN 11 PM 2: 57 SECRETARY OF STATE

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COVER LETTER

TO: Amendment Section

Division of Corporations	•
NAME OF CORPORATION: SO IS GU	bd inc 20000070092
The enclosed Articles of Amendment and fee are	submitted for filing.
Please return all correspondence concerning this r	matter to the following:
Cipri	Name of Contact Person
100 NT 1	Firm/ Company
Dania Beac	Address Ch FL 3 300 4 City/ State and Zip Code
Ciprian 21598 E-mail address: (10 bc	whot mail.com used for future annual report notification)
For further information concerning this matter, ple	
Ciprian Emersor	at (454) 415 2604 Area Code & Daytime Telephone Number
Name of Contact Person	Area Code & Daytime Telephone Number
Enclosed is a check for the following amount mad	de payable to the Florida Department of State:
\$35 Filing Fee \$3.75 Filing Fee & Certificate of Status	Securified Copy (Additional copy is enclosed) Securified Copy (Additional Copy is enclosed) Securified 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
LananaSSCC E.L. 12.11 →	ATTENDED SHEEL BUILD OF THE

Tallahassee, FL 32303

Articles of Amendment

	-	FILED
squbd "	Inc	2021 JAN 11 PM 2 PT
poration as currentl	y filed with the Flo	
1200000-T	0092	TALE THRY OF STATE
<u> 100000-1</u>		(own)
Florida Statutes, this	Florida Profit Corp	poration adopts the following amendmen
f the corporation:		
		The new
ord "corporation," "c "Inc," or "Co". A ∙ abbreviation "P.A."	f professional corp.	rporated" or the abbreviation "Corp.," poration name must contain the word
licable: <u>T ADDRESS</u>)		
	•	
E CE BOX)		
		
		ter the name of the
		·
(Florida str	veet address)	
		, Florida
	(City)	, Florida (Zip Code)
	(= : 2: /	-1 - 7
		obligations of the position
gem. Tum jummur)	·m una accept me	vonganons of our position.
	Articles of Inc. SCINA poration as currentl \$20007 Document Number of Florida Statutes, this file the corporation. The corporation "Co" is abbreviation "P.A." licable: TADDRESS) registered office address (Florida str.) Registered office address	Articles of Incorporation of SQUID (C) poration as currently filed with the Flo 2000070092 Document Number of Corporation (if kn Florida Statutes, this Florida Profit Corp I the corporation; ord "corporation; ord "corporation; ord "corporation," "company," or "inco "Inc." or "Co". A professional corp abbreviation "P.A." licable: T ADDRESS) cegistered office address in Florida, entered office address: (Florida street address)

Signature of New Registered Agent, if changing

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>John</u>	n Doe	
X Remove	<u>V</u> <u>Mik</u>	te Jones	
X Add	<u>SV</u> <u>Sall</u>	y Smith	
Type of Action (Check One)	<u>Title</u>	Name (4)	<u>Addres</u> s
1) Change	<u>P</u>	NestorN Tones Rivera	4027 N Armenia Ave #210 Tampa, FC 33607
Add Remove			Tampa, +2 33607
Remove 2) Change	<u> </u>	Ryan A Soper	4023 N Armenia Ave #200 Tampa, FL 33607
Add		·	Tampa, FL 33607
Remove Change			
Add			
Remove			
4) Change			
Add			
Remove 5) Change			
Add			
Remove			
6) Change			
Add			
Remove			

ttach additional sheets, if necessary)). (Be specific)			
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				<u>. </u>
				
				• •
an amendment provides for an ex	change, reclassifi	cation, or cancells	ation of issued shar	es.
provisions for implementing the an	nendment if not c	ontained in the ar	nendment itself:	
(if not applicable, indicate N/A)				
			· · ·	
				···

	, if other than the
date this document was signed.	
Effective date if applicable: (no me	ore than 90 days after amendment file date)
Note: If the date inserted in this block does not meet document's effective date on the Department of State's	the applicable statutory filing requirements, this date will not be listed as th records.
Adoption of Amendment(s) (CHECK C	<u>NE</u>)
The amendment(s) was/were adopted by the incorpo action was not required.	rators, or board of directors without shareholder action and shareholder
The amendment(s) was/were adopted by the shareholders was/were sufficient for approva	lders. The number of votes east for the amendment(s)
☐ The amendment(s) was/were approved by the sharel must be separately provided for each voting group of	
"The number of votes east for the amendments	s) was/were sufficient for approval
by(voting group)	
(voing grou	φņ
Dated 12/15/2020	
MALAT	
	other officer – if directors or officers have not been
appointed fiduciary by that	r – if in the hands of a receiver, trustee, or other court fiduciary)
Negton NT	or printed name of person signing)
Yesident	
(Title of	person signing)

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