720000074462

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COVER LETTER

TO: Amendment Section Division of Corporations

NAME OF CORPO	RATION: CG SWEET DESI	NG INC			
DOCUMENT NUMI	P20000074462				
The enclosed Articles	of Amendment and fee are su	bmitted for filing.			
Please return all corre	spondence concerning this ma	tter to the following:			
	BLANCA A MARTINEZ				
		Name of Contact Person Firm/Company	i coss		
	129 LONE PINE TERRACE				
		Address			
	HALLANDALE, FL 33009		 		
City/ State and Zip Code					
blancamartinezconsultor@yahoo.es					
	E-mail address: (to be us	sed for future annual report	notification)		
For further informatio	n concerning this matter, pleas	se call:			
BLANCA A MARTI	NEZ	at (8029938		
Name of Contact Person		Area Co	de & Daytime Telephone Number		
Enclosed is a check for	r the following amount made	payable to the Florida Depa	artment of State:		
☐ \$35 Filing Fee	■\$43.75 Filing Fee & Certificate of Status	S43.75 Filing Fee & Certified Copy (Additional copy is enclosed)	S52.50 Filing Fee Certificate of Status Certified Copy (Additional Copy is enclosed)		
Ame Divi P.O	ling Address endment Section sion of Corporations Box 6327 ahassee, FL 32314	Amend Division The Co 2415 N	Address Iment Section on of Corporations entre of Tallahassee N. Monroe Street, Suite 810 assee, FL 32303		

Articles of Amendment to Articles of Incorporation of

CG SWEET DESING INC				
(Name	of Corporation as curren	tly filed with the Florida	Dept. of State)	
P20000074462				
	(Document Number	of Corporation (if known)		
Pursuant to the provisions of section 607 its Articles of Incorporation:	,1006, Florida Statutes, thi	s Florida Profit Corporati	ion adopts the follow	ing amendment(s) t
A. If amending name, enter the new n	ame of the corporation:			
CG SWEET DESIGN INC				The new
name must be distinguishable and contain "Inc.," or Co.," or the designation "Contrartered," "professional association,"	Corp, " "Inc," or "Co".	A professional corporati		tion "Corp.,"
B. Enter new principal office address, (Principal office address MUST BE A S		N/A		
			a	F-3
C. Enter new mailing address, if appl		N/A		:
(Mailing address MAY BE A POST	OFFICE BOX)			<u>・・・・</u>
D. If amending the registered agent an new registered agent and/or the new			e name of the	
Name of New Registered Agent	N/A			
				
	(Florida s	treet address)		_
New Registered Office Address:			, Florida	
1		(City)	CZiţ	o Code)
New Registered Agent's Signature, if o				
I hereby accept the appointment as regist	tered agent. I am familiar	with and accept the oblig	ations of the position	<u>.</u>

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	PT	John Do	<u>e</u>			
X Remove	<u>v</u>	Mike Jo				
X Add	<u>SV</u>	<u>Şally Sn</u>	<u>nith</u>			
Type of Action (Check One)	<u>Title</u>		<u>Name</u>		<u>Addres</u> s	
l) Change				<u> </u>		
Add						
Remove						
2) Change						<u>.</u> .
Add						
Remove 3) Change		_				
Add						
Remove						
4) Change						
Add						
Remove						
5) Change						
Add		_				
Remove						
6) Change		<u> </u>				
Add						
Remove						

1.6	(Be specific)	
/A		
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		•••
		<u>.</u>
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If an amendment provides for an exch	nange, reclassification, or cancellation of issued shares,	
provisions for implementing the ame	nange, reclassification, or cancellation of issued shares, and and it not contained in the amendment itself:	
If an amendment provides for an exch provisions for implementing the ame (if not applicable, indicate N/A)	nange, reclassification, or cancellation of issued shares, and and if not contained in the amendment itself:	
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provisions for implementing the ame (if not applicable, indicate N/A)	nange, reclassification, or cancellation of issued shares, and and if not contained in the amendment itself:	

	s) adoption:	, if other than the
late this document was signed.		
Effective date if applicable:	09/15/2020	
	(no more than 90 days after amendment file date)	
	nis block does not meet the applicable statutory filing requirements, the Department of State's records.	is date will not be listed as the
adoption of Amendment(s)	(CHECK ONE)	
The amendment(s) was/wern action was not required.	e adopted by the incorporators, or board of directors without shareholder	action and shareholder
The amendment(s) was/wer by the shareholders was/we	e adopted by the shareholders. The number of votes cast for the amenda re sufficient for approval.	nent(s)
must be separately provided	e approved by the shareholders through voting groups. The following stall for each voting group entitled to vote separately on the amendment(s):	atement
"The number of votes	cast for the amendment(s) was/were sufficient for approval	
by	(voting group)	
	(voting group)	
11/17/	2020	
Dated	<u> </u>	
Signature	Philip	
Signature(By	a director, president of other officer – if directors or officers have not b	een
	ected, by an incorporator – if in the hands of a receiver, trustee, or other	court
ap	pointed fiduciary by that fiduciary)	
	CARLILEGT D RODRIGUEZ OJEDA	
	(Typed or printed name of person signing)	
	PRESIDENT	
	(Title of person signing)	_