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(Red	questor's Name)	_
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Michael

FEB 1:5 2021 I ALBRITTON

COVER LETTER

TO: Amendment Section Division of Corporations

NAME OF CORPOR	RATION: SCORPION MUSI	K CORP	<u> </u>	
DOCUMENT NUME	BER:			
	of Amendment and fee are sub	omitted for filing.		
Please return all corres	spondence concerning this mat	ter to the following:		
	ALFONSO SELIN CRUZ			
		Name of Contact Person	i	
	SCORPION MUSIK CORP			
		Firm/ Company		
	14335 SW 98TH TERRACE	• •		
		Address	<u></u>	
	MIAMI FL, 33186			
		City/ State and Zip Code	3	
	smonterroso07@gmail.com			
	- -	sed for future annual report	notification)	
For further informatio	n concerning this matter, pleas	se call:		
ALFONSO SELIN C	RUZ	786	612-9206 de & Daytime Telephone Number	
Name	of Contact Person	Area Co	de & Daytime Telephone Number	
Enclosed is a check for	or 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)	□\$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		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

c.	COR	DIOS	1.8	21.11	11/	COL	2 12
•		P'IU In'		1115		1 1 7 F	.

(Name of Corporation :	as currently f	iled with the	Florida Der	ot, of State)	. <u>.</u>	
P20000075653	11.5 C 11.1 C 11.5					
	t Number of C	Corporation (if	known)			_
Pursuant to the provisions of section 607.1006, Florida Strits Articles of Incorporation:				adopts the fol	lowing amendm	nent(s) t
A. If amending name, enter the new name of the corpo					The ne	
name must be distinguishable and contain the word "corpo "Inc.," or Co.," or the designation "Corp," "Inc," o "chartered," "professional association," or the abbrevia	r "C σ ". If $ ho$	npany," or "ir professional c	icorporated orporation	" or the abbro name must o	eviation "Corp., contain the wor	,'' rd
B. Enter new principal office address, if applicable: (Principal office address <u>MUST BE A STREET ADDRI</u>	ESS)		···-			
			-			-
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)				····	: !	-
					- -	
D. If amending the registered agent and/or registered	l office addre	ss in Florida,	enter the n	ame of the	<u> </u>	-
new registered agent and/or the new registered off	fice <u>address:</u>					
Name of New Registered Agent					· ····	
	(Florida stree	rt address)				
New Registered Office Address:				, Florida		
New Registered Office Address.		City)			(Zip Code)	_
New Registered Agent's Signature, if changing Regist I hereby accept the appointment as registered agent. To	am familiar w				sition.	
Signati	ure of New Re	gistered Agent	, if changing	<u> </u>	_	
Check if applicable						

 \square 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 = ChiefExecutive 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>	John Doe	
X Remove	<u>V</u>	Mike Jones	
X Add	<u>sv</u>	Sally Smith	
Type of Action	Title	Name	<u>Addres</u> s
(Check One) 1) X Change	Р	ALFONSO SELIN CRUZ	14335 SW 98TH TERRACE
Add			MIAMI FL, 33186
Remove			
2) X Change	VP	BARBRA SAMMUR	14335 SW 98TH TERRACE
Add			MIAMI FL, 33186
Remove 3) X Change	Т	SELIN ALFONSO CRUZ	14335 SW 98TH TERRACE
Add			MIAMI FL, 33186
Remove			
4) X Change	<u>S</u>	INANNA VALERIA CRUZ	14335 SW 98TH TERRACE
Add			MIAMI FL, 33186
Remove			A 1225 CHU ONTH TIPBD A CIP
5) X Change	D	KAMIL ALFONSO CRUZ	14335 SW 98TH TERRACE
Add			MIAMI FL, 33186
Remove			
6) Change			
Add			
Remove			

in amendment provides for an exchange, reclassification, or cancellation of issued shares, ovisions for implementing the amendment if not contained in the amendment itself: (if not applicable, indicate N/A)		us, if necessary).	(Be specific)	ge(s) here:		
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The date of each amendmen	t(s) adoption:	, if other than the
date this document was signed		
Effective date <u>if applicable</u> :	(no more than 90 days after o	imendment file date)
Note: If the date inserted in document's effective date on	this block does not meet the applicable statutor he Department of State's records.	ry filing requirements, this date will not be listed as the
Adoption of Amendment(s)	(<u>CHECK ONE</u>)	
The amendment(s) was/we action was not required.	re adopted by the incorporators, or board of dire	ctors without shareholder action and shareholder
☐ The amendment(s) was/we by the shareholders was/w	re adopted by the shareholders. The number of tere sufficient for approval.	votes cast for the amendment(s)
☐ The amendment(s) was/we must be separately provid	re approved by the shareholders through voting ed for each voting group entitled to vote separat	groups. The following statement ely on the amendment(s):
"The number of vote	s cast for the amendment(s) was/were sufficient	for approval
by	(voting group)	·"
	(voting group)	
12/2 Dated	9/2020	
Sionature	Alfonso Selin Cruz By a director, president or other other - if direct	
5	By a director, president or other officer - if direct elected, by an incorporator - if in the hands of a appointed fiduciary by that fiduciary)	tors or officers have not been receiver, trustee, or other court
	ALFONSO SELIN CRUZ	
	(Typed or printed name of per	son signing)
	President	
	(Title of person signing)	