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To:

Division of Corporations

Fax Number : (850)617-6380

From:

Account Name : HOMMERDING ADVISORS LLC

Account Number : I20220000171 Phone : (954)532-3842 Fax Number : (954)532-3847

Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please.

Email Address: CORPORATE PEAGLE - TAX. COM

COR AMND/RESTATE/CORRECT OR O/D RESIGN PEDEPRAFLAVIA, INC

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COVER LETTER

TO: Amendment Section Division of Corporat						
NAME OF CORPORA	PEDEPRA	FLAVIA, INC				
DOCUMENT NUMBER	P20000085013					
The enclosed Articles of	Amendment and fee are su	bmitted for filing.				
Please return all correspon	ndence concerning this ma	tter to the following:				
		ALVIN HOMMERDING			2024 JUL 23	_
		Name of Contact Person	n	- :	ii) l	
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		Firm/ Company	·	-:-	ω 	T
	5	493 WILES ROAD SUITE	E 105) FM II: 55	(Trans
		Address				32.
	CC	CONUT CREEK FL 3307	3	•	27	
		City/ State and Zip Cod	c			
	CORF	ORATE@EAGLE-TAX.0	COM			
		sed for future annual report				
For further information co	oncerning this matter, pleas	se call:				
ALVIN HO	MMERDING	at (532-3842			
Name of C	Contact Person	Arca Co	de & Daytime Telephone Nun	iber		
Enclosed is a check for the	e following amount made	payable to the Florida Depa	artment of State:			
\$35 Filing Fee	□\$43.75 Filing Fee & Certificate of Status	\$43.75 Filing Fee & Certified Copy (Additional copy is chelosed)	☐\$52.50 Filing Fee Certificate of Status Certified Copy (Additional Copy is enclosed)			
Amendi Division P.O. Bo	Address ment Section n of Corporations x 6327 ssee, FL 32314	Amend Division The C 2415 I	Address Iment Section on of Corporations entre of Tallahassee N. Monroe Street, Suite 810 assee, FL 32303			

Check if applicable

☐ The amendment(s) is/are being filed pursuant to s. 607.0120 (11) (c), F.S.

Articles of Amendment to Articles of Incorporation of

(<u>Name</u> P20000085012	of Corporation as currently filed with the	e Florida Dept. of State)	
2000000012	(Document Number of Corporation	(if known)	
Pursuant to the provisions of section 607 ts Articles of Incorporation:	7.1006, Florida Statutes, this <i>Florida Profu</i>	,	ment(s) to
A. If amending name, enter the new n	name of the corporation:		
ame must he distinguishable and contai	n the word "corporation," "company," or		ew
Inc.," or Co.," or the designation "chartered," "professional association,	Corp," "Inc," or "Co". A professional	corporation name must contain 122 wo	ord
. Enter new principal office address.	if anning bles		7
Principal office address MUST BE A S	STREET ADDRESS)	2 3	recessor rescond
		Z.	
		- Ann	J
		· •	
. Enter new mailing address, if appl		ं ज	
(Mailing address MAY BE A POST		55	-
			- -
			- - -
(Mailing address MAY BE A POST). If amending the registered agent as	nd/or registered office address in Florids	· CI	- -
(Mailing address MAY BE A POST). If amending the registered agent as new registered agent and/or the ne	nd/or registered office address in Florids	· CI	- -
(Mailing address MAY BE A POST). If amending the registered agent as	nd/or registered office address in Florida w registered office address:	· CI	-
(Mailing address MAY BE A POST). If amending the registered agent as new registered agent and/or the ne	nd/or registered office address in Florida w registered office address: EAGLE TAX	· CI	-
(Mailing address MAY BE A POST). If amending the registered agent as new registered agent and/or the ne	nd/or registered office address in Florida w registered office address: EAGLE TAX 5493 WILES ROAD SUITE 105	· CI	-

If amending the Officers and/or Directors, enter the title and name of each officer/director being removed and title, name, and

(Attach additional sheets, if necessary)

Please note the officer/director title by the first letter of the office title:

address of each Officer and/or Director being added:

 $P = President; \ V = Vice \ President; \ T = Treasurer; \ S = Secretary; \ D = Director; \ TR = Trustee; \ C = Chairman or Clerk; \ CEO = Chief Executive Officer; \ CFO = Chief Financial Officer. If an officer/director holds more than one title, list the first letter of each office held. President, Treasurer, Director would be PTD.$

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> </u>	John Doe		
X Remove	<u>v</u>	Mike Jones		2
_X Add	<u>sv</u>	Sally Smith		024、
Type of Action (Check One)	Title	<u>Name</u>	<u>Address</u>	2024 JUL 23
1) Change				Λ··
Add				M 11::55
Remove				
2) Change				
Add				
Remove 3) Change				
Add				
Remove				
4) Change				
Add				
Remove				
5) Change				
Add				
Remove				
δ) Change				 -
Add				
Remove				

Attach additional sheets, if necessary).	(Be specific)	
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an amendment provides for an exch	ange, reclassification, or cancellation of issued shadment if not contained in the amendment itself:	ares,
(if not applicable, indicate N/A)	nument if not contained in the amendment itself:	

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 the 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) O7/23/2024 Dated (By a director president or other officer—iffurcctors 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) FLAVIA DORIA SOLARINO (Typed or printed name of person signing) PRESIDENT (Title of person signing)	The date of each amendment(s) date this document was signed.	adoption:		_, if other than the
Note: If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as the 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) (voting group) (voting group) The pollowing statement appointed fidewing the following groups of the amendment(s): "The number of votes cast for the amendment(s) was/were sufficient for approval 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 fidewing by that fiduciary FLAVIA DORIA SOLARINO (Typed or printed name of person signing) PRESIDENT	J			
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PRESIDENT		FLAVIA DORIA SOLARINO)	
		(Typed or printed no	ame of person signing)	
(Title of person signing)		PRESIDENT		
		(Title of person sign	ning)	