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SECRETARY OF STAT

COVER LETTER

TO: Amendment Section Division of Corporations

NAME OF CORPO	RATION: ELSITDIESA INT	TERNATIONAL INC	
DOCUMENT NUM	P20000086875		
The enclosed Articles	of Amendment and fee are su	bmitted for filing.	
Please return all corre	spondence concerning this ma	atter to the following:	
	PEDRO GONZALEZ		
		Name of Contact Person	
	NOTARIO LATINO LLC		
		Firm/ Company	
	1500 WESTON RD, SUITE	218	
		Address	
	WESTON, FL 33326		
		City/ State and Zip Code	
	info@notariolatino.com		
	E-mail address: (to be us	sed for future annual report	notification)
For further informatio	n concerning this matter, plea	se call:	
Pedro Gonzalez		786 at (5019803
Name	of Contact Person		de & Daytime Telephone Number
Enclosed is a check for	r the following amount made	payable to the Florida Depa	rtment of State:
S35 Filing Fee	☐\$43.75 Filing Fee & Certificate of Status	□\$43.75 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 Ce	Address ment Section n of Corporations entre of Tallahassee I. Monroe Street, Suite 810

Tallahassee, FL 32303

Articles of Amendment to Articles of Incorporation of

	to Articles of Incorporation		
	of	FILE	• •
ELSITDIESA INTERNATIONAL INC	to Articles of Incorporation of tion as currently filed with the Florida Dept	11.5	D
(Name of Corporat	tion as currently filed with the Florida Dept	of State DZ4 AUG 10	
P20000086875		SECORE	' 7: 38
(Docu	ment Number of Corporation (if known)	TALI ALLY OF	STATE
Pursuant to the provisions of section 607.1006, Floric ts Articles of Incorporation:	da Statutes, this <i>Florida Profit Corporation</i> ad	opts the following amendmen	II(s)Lio
a. If amending name, enter the new name of the o	corporation:		
name must be distinguishable and contain the word "c "Inc.," or Co.," or the designation "Corp," "Inc, "chartered," "professional association," or the abbr	"," or "Co". A professional corporation no	The new or the abbreviation "Corp.," ime must contain the word	
3. Enter new principal office address, if applicable Principal office address MUST BE A STREET AD			
Enter new mailing address, if applicable:			
(Mailing address <u>MAY BE A POST OFFICE Bo</u>	<u></u>		
If amending the registered agent and/or registered new registered agent and/or the new registered		e of the	
Name of New Registered Agent		·	
	(Florida street address)	-	
New Registered Office Address:		Placida	
New Registered Office Address:	(City)	Florida(Zip Code)	
Sew Registered Agent's Signature, if changing Rehereby accept the appointment as registered agent.		of the position.	

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 Doe	
X Remove	$\underline{\mathbf{V}}$	Mike Jones	
X Add	<u>sv</u>	Sally Smith	
Type of Action (Check One)	<u>Title</u>	<u>Name</u>	<u>Addres</u> s
1) Change	CEO	CARLA G CARRASCO OSEJOS	12905 SW 42 STREET 210
Add			MIAMI, FL 33175
X Remove			
2) Change	CEO	JAVIER A. NAVARRO LUNA	7819 NW 104th AVE. AP 4
X Add			DORAL FL 33178
Remove Change			
Add			
Remove			
4) Change			
Add			
Remove			
5) Change			
Add			
Remove			
6) Change			
Add			
Remove			

If amending or adding additional Articles, enter change(s) here: (Attach additional sheets, if necessary). (Be specific)	
	
	
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	- · · · · · · · · · · · · · · · · · · ·
If an amendment provides for an exchange, reclassification, or cancellation of issued s	hares,
provisions for implementing the amendment if not contained in the amendment itself	<u> </u>
(if not applicable, indicate N/A)	
VIER A. NAVARRO LUNA PURCHASED 60% OF THE COMPANY (60 of 100 shares)	
	-
	

	July 30, 2024		
The date of each amendment date this document was signed.		, if	other than the
Effective date if applicable:	July 30, 2024		
· · · · · · · · · · · · · · · · · · ·	(no more than	90 days after amendment file date)	<u>_</u>
Note: If the date inserted in the document's effective date on the	nis block does not meet the apple Department of State's records.	licable statutory filing requirements, this date will not b	e listed as the
Adoption of Amendment(s)	(<u>CHECK ONE</u>)		
☐ The amendment(s) was/were action was not required.	adopted by the incorporators, or	r board of directors without shareholder action and sharel	nolder
■ The amendment(s) was/were by the shareholders was/we		he number of votes cast for the amendment(s)	
☐ The amendment(s) was/were must be separately provided	approved by the shareholders the for each voting group entitled to	nrough voting groups. The following statement o vote separately on the amendment(s):	
"The number of votes	cast for the amendment(s) was/w	vere sufficient for approval	
Shareholders by		••	
<u> </u>	(voting group)		
July 30 Dated	, 2024		
	Carlo 6 Carrosc	0	
Signature	ed by Carle G Carreson & Time Aug 10 2024 12 53 36 -05		
sel	a director, president or other off ected, by an incorporator – if in t sointed fiduciary by that fiduciary	ficer – if directors or officers have not been he hands of a receiver, trustee, or other court y)	
	CARLA G. CARRASCO O	SEJOS	
	(Typed or printed	name of person signing)	
	CEO		
	(Title of person s	igning)	