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SECRETARY OF STATE
TALLAHASSEE, FL



COVER LETTER

TO: Amendment Section Division of Corporations

NAME OF CORPORATION: Latin Hultiservice Corp		
DOCUMENT NUMBER:		
The enclosed Articles of Amendment and fee are submitted for filing.		
Please return all correspondence concerning this matter to the following:		
Yania Valdes Person Name of Contact Person		
Firm/ Company		
6006 CRESTRIDGE Rd		
Taupa Fl 33634 City State and Zip Code		
yaniavphab@gmail.com		
E-mail address: (to be used for future annual report notification)	SE(202
For further information concerning this matter, please call:	ORETA ALLAH	1861
Vania Valdes Perel at (813) 812-1596 Name of Contact Person Area Code & Daytime Telephone Number	TARY OF STATE	
Enclosed is a check for the following amount made payable to the Florida Department of State:	FL STAT	. 0
\$35 Filing Fee Certificate of Status Certificate of Status Certified Copy (Additional copy is enclosed) \$43.75 Filing Fee Certified Copy (Additional Copy is enclosed)	Li C	•
Mailing Address Street Address		

Amendment Section **Division of Corporations** P.O. Box 6327 Tallahassee, FL 32314

Amendment Section Division of Corporations The Centre of Tallahassee 2415 N. Monroe Street, Suite 810 Tallahassec, FL 32303

Articles of Amendment

to Articles of Incorporation of

i 1. 11	OT .	\mathcal{C}				
Mu	ration as currently f	ORP	ido Dont of State)	· · · · · · · · · · · · · · · · · · ·		
(Name of Corpo	ration as currently t	ned with the Pigr	ida Dept. of State)			
720	2000093	406			-	
(De	ocument Number of C	orporation (if know	vn)			
Pursuant to the provisions of section 607,1006, Floits Articles of Incorporation:	orida Statutes, this Flo	orida Profit Corpo	ration adopts the follo	owing amen	dment(s	5) to
A. If amending name, enter the new name of th	ne corporation:					
Perfect Illusiname must be distinguishable and contain the word	ons by	YAR	ORP	The		
"Inc.," or Co.," or the designation "Corp." "inchartered," "professional association," or the a	Inc," or "Co". A p	professional corpo	ration name must co	ontain the w	ord	
B. Enter new principal office address, if applic (Principal office address MUST BE A STREET.)	able: ADDRESS)					
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE	<u>(BOX</u>)					
				SE	20	
	-			AL NO.	24 0	drawnije to
		·	4.48844	- EE	− ₽	•
D. If amending the registered agent and/or reg new registered agent and/or the new registe		s in Florida, enter	the name of the	TARY OF S	2	
 -	, , , , , , , , , , , , , , , , , , ,			OF 3SE	3	11
Name of New Registered Agent				-E ST		
	(Florida street	addwarel		_ <u>-</u> A	t ₀	
	(Promitta street	aaaress)		1		
New Registered Office Address:	·C	ityi	, Florida	(Zip Code)	_	
			·			
New Registered Agent's Signature, if changing I hereby accept the appointment as registered age.		b and anount the ai	htimosionno ofsku monis	÷		
I hereny accept the appointment as registered age	ni. Tam jamiliar wili	п апа ассері іпе оі	onganons of the posit	ion.		
	· · · · · · · · · · · · · · · · · · ·					
	Signature of New Regi	istered Agent, if ch	anging			

Check if applicable
\$\forall \text{The amendment(s) is/arc being filed pursuant to s. 607.0120 (11) (c), 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)

Remove

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 Doc	
X Remove	<u>V</u>	Mike Jones	
X Add	<u>sv</u>	Sally Smith	
Type of Action (Check One)	<u>Title</u>	<u>Name</u>	Address
1) Change			
Add			114
Remove			
2) Change			SEC TA
Add			CRET
Remove 3) Change			HARY -2
Add			OF S.
Remove			FLATE
4) Change			
Add			
Remove			
5) Change			
Add			
Remove			
δ) Change			
Add			

E. If amending or adding additional Articles, enter change(s) here: (Attach additional sheets, if necessary). (Be specific)	
Article TIL	
Provide LOHHERSIAL and Consumer photography	
and videography service. Including photography for advertising, real state, products, Fashion and Family portrait, prignary, newborn, children, wedding, quincean eras photography, E.t.c. Dress rental and event decoration	٤
THETA LLA	2024 OCT -2
provisions for implementing the amendment if not contained in the amendment itself: (if not applicable, indicate N/A)	

(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.	The date of each amendment(s) ado date this document was signed.	option:	if other than the
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) Dated OP 19 20 24 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 fiduciary by that fiduciary)	Effective date if applicable:	(no more than 90 days after amendment file date)	
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"The number of votes cast for the amendment(s) was/were sufficient for approval by)
Dated 09 19 2024 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 fiduciary by that fiduciary)			nt
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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 fiduciary by that fiduciary) (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 fiduciary by that fiduciary)	by		
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(Title of person signing)	Signature(By a dire selected,	ector, president or other officer – if directors or officers have not been by an incorporator – if in the hands of a receiver, trustee, or other court diffiduciary by that fiduciary) Yan'a Valdes Person signing) Har	-2 PH ARY OF HASSE