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Office Use Only

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COVER LETTER

TO: Amendment Section Division of Corporations

NAME OF CORPO	RATION:	CAND FINANCIAL COR	PORATION	
DOCUMENT NUM	D20000000172			
The enclosed Articles	of Amendment and fee are su	bmitted for filing.		
Please return all corre	espondence concerning this ma	tter to the following:		
	GUSTAVO MENENDEZ			
	Name of Contact Person			
		Firm/ Company		
	665 N US HWY 17 #1435			
		Address		
	EAGLE LAKE FLORIDA 33	3839		
		City/ State and Zip Cod	<u> </u>	
	EXCEPTIONALMULTICO	RP@OUTLOOK.COM		
	E-mail address: (to be us	sed for future annual report	notification)	
For further information	on concerning this matter, pleas	se call:		
GUSTAVO MENEN	PDEZ	at (662 -4854	
Name	of Contact Person	Area Co	de & Daytime Telephone Number	
Enclosed is a check f	or the following amount made	payable to the Florida Depa	artment of State:	
S35 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, F1, 32314		Amend Divisio The Co 2415 Y	Address Iment Section on of Corporations entre of Tallahassee N. Monroe Street, Suite 810 ussee, FL 32303	

Articles of Amendment

	to	
	Articles of Incorporation	era puna o am Tendi
	of	2011 AUG -2 AM 7: 03
M INCOMETAX AND FINANCIAL CORP	ORATION	STREAM THEF STILL
(Name of Cor	rporation as currently filed with the Fl	lorida Dept. of State)
220000099172		
((Document Number of Corporation (if k	(nown)
Pursuant to the provisions of section 607,1006. Is Articles of Incorporation:	Florida Statutes, this Florida Profit Cor	rporation adopts the following amendmen
A. If amending name, enter the new name o	f the corporation:	
name must be distinguishable and contain the w		The new
'Inc.," or Co.," or the designation "Corp," 'chartered," "professional association," or the		rporation name must contain the word
B. Enter new principal office address, if app Principal office address <u>MUST BE A STREE</u>	dicable:	
3. Enter new principal office address, if app Principal office address <u>MUST BE A STREE</u>	blicable:	
B. Enter new principal office address, if app Principal office address <u>MUST BE A STREE</u> C. Enter new mailing address, if applicable (Mailing address <u>MAY BE A POST OFFI</u>	cicable: ET ADDRESS) E CE BOX) registered office address in Florida, en	nter the name of the
B. Enter new principal office address, if app Principal office address MUST BE A STREE C. Enter new mailing address, if applicable (Mailing address MAY BE A POST OFFI D. If amending the registered agent and/or a	cicable: ET ADDRESS) E CE BOX) registered office address in Florida, en	nter the name of the
3. Enter new principal office address, if app Principal office address MUST BE A STREE C. Enter new mailing address, if applicable (Mailing address MAY BE A POST OFFI D. If amending the registered agent and/or in new registered agent and/or the new registered agent and/or the new registered agent.	erable: ET ADDRESS) E CE BOX) registered office address in Florida, ensistered office address:	nter the name of the
3. Enter new principal office address, if app Principal office address MUST BE A STREE C. Enter new mailing address, if applicable (Mailing address MAY BE A POST OFFI D. If amending the registered agent and/or in new registered agent and/or the new registered agent and/or the new registered agent.	cicable: ET ADDRESS) E CE BOX) registered office address in Florida, en	nter the name of the

New Registered Agent's Signature, if changing Registered Agent:

Thereby accept the appointment as registered agent. I am familiar with and accept the obligations of the position.

Signature of New Registered Agent, if changing

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>	<u>John Doe</u>	
X Remove	<u>V</u>	Mike Jones	
X Add	<u>sv</u>	Sally Smith	
Type of Action (Check One)	Title	<u>Name</u>	Address
1) Change	þ	GRACIELA MENENDEZ	10830 SW 153RD LANE
Add		-	DUNNELLON, FL 34432
X Remove			
2) Change	S	GRACIELA MENENDEZ	665 N US HWY 17 #1435
X Add			EAGLE LAKE FL 33839
Remove 3) Change	VP	GUSTAVO MENENDEZ	389 ST GEORGES ÇIR
Add			EAGLE LAKE FL 33839
X Remove			
4) Change	P	GUSTAVO MENENDEZ	665 N US HWY 17 #1435
X Add			EAGLE LAKE FL 33839
Remove			
5) Change		_	
Add			
Remove			
6) Change			
Add			
Remove			

ttach additional sheets, if necessary).	(Be specific)			
17			 	<u> </u>
		 		
		, ,		
				
f an amendment provides for an exc	hange, reclassification	or cancellation of issu	ed shares,	
provisions for implementing the an	endment if not contain	ed in the amendment i	tself:	
(if not applicable, indicate N/A)				
			,	

The date of each amendment(s date this document was signed.	adoption:	, if other than the
_		
Effective date if applicable:	(no more than 90 days after amendment file date)	
	(no more than 20 tays after amenament fite date)	
Note: If the date inserted in thi document's effective date on the	s 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)	(<u>CHECK ONE</u>)	
The amendment(s) was/were action was not required.	adopted by the incorporators, or board of directors without shareholder	r action and shareholder
☐ The amendment(s) was/were by the shareholders was/were	adopted by the shareholders. The number of votes east for the amendr sufficient for approval.	nent(s)
☐ The amendment(s) was/were must be separately provided	approved by the shareholders through voting groups. The following sta- for each voting group entitled to vote separately on the amendment(s):	atement
"The number of votes of	ast for the amendment(s) was/were sufficient for approval	
by		
"• 	(voting group)	
06/26/20 Dated	21	
Signature (1)	director, president or other officer – if directors or officers have not b	
sd€c	relifector, president or other officer – if directors or officers have not be sted, by an incorporator – if in the hands of a receiver, trustee, or other inted fiduciary by that fiduciary)	court
	GRACIELA MENENDEZ	
	(Typed or printed name of person signing)	
	PRESIDENT	
	(Title of person signing)	