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## **COVER LETTER**

TO: Amendment Section

Division of Corporations

Tailahassee, FL 32314

NAME OF CORPORATION: SSALBBA, CORP DOCUMENT NUMBER: P21000008226 The enclosed Articles of Amendment and fee are submitted for filing. Please return all correspondence concerning this matter to the following: Paola Donatiello Name of Contact Person SSALBBA, CORP Firm/ Company 9727 Costa del Sol Blvd Address Doral / Florida 33178 City/ State and Zip Code ssalbbacausa@gmail.com E-mail address: (to be used for future annual report notification) For further information concerning this matter, please call: at (786 ) 4589612

Area Code & Daytime Telephone Number Paola Donatiello Name of Contact Person Enclosed is a check for the following amount made payable to the Florida Department of State: ■\$43.75 Filing Fee & □\$43.75 Filing Fee & ☐\$52.50 Filing Fee \$35 Filing Fee Certificate of Status Certificate of Status Certified Copy (Additional copy is Certified Copy enclosed) (Additional Copy is enclosed) Street Address Mailing Address Amendment Section Amendment Section Division of Corporations Division of Corporations The Centre of Tallahassee P.O. Box 6327

2415 N. Monroe Street, Suite 810

Tallahassee, FL 32303

## Articles of Amendment Articles of Incorporation of

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SSALBBA , CORP				
(Name of	f Corporation as curr	ently filed with the Florida De	pt. of State)	
P21000008226				
<del></del>	(Document Numb	er of Corporation (if known)		
Pursuant to the provisions of section 607.1 its Articles of Incorporation:	1006, Florida Statutes, t	this Florida Profit Corporation	adopts the following	g amendment(s)
A. If amending name, enter the new na	me of the corporation	1 <u>:</u>		
N/A				The new
name must be distinguishable and contain "Inc.," or Co.," or the designation "Corchartered," "professional association,"	orp, " "Inc, " or "Co"	. A professional corporation		on "Corp.,"
B. Enter new principal office address, i (Principal office address <u>MUST BE A ST</u>	<u>f applicable:</u> TREET ADDRESS)	N/A		
<u> </u>	,			<del></del>
				2
				5
C. Enter new mailing address, if applie (Mailing address MAY BE A POST O		A/A		23
(Stutting dadress SEAT DE ATOST O	HITCL BOX	17 17		
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	Marine Comment of the comment	and the contract of the contra		
D. If amending the registered agent and new registered agent and/or the new			ante or the	
		<del></del>		
Name of New Registered Agent	10/13			-
				<del></del>
	1	a street address)		
New Registered Office Address:	<u>N/A</u>		, Florida	
		(City)	(Zip C	Coder
New Registered Agent's Signature, if ch	ranging Registered Ac	ent:		
I hereby accept the appointment as registe			ons of the position.	
	Ciana atau an C Ma	w Registered Agent, if changing		_
	Signature of Ne	» кедіметей ядені, іј спапуіпу	;	
Check if applicable				
☐ The amendment(s) is/are being filed pu	irsuant 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 = 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: <u>X</u> Change	<u>PT</u>	John Doe	
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>	<u>Addres</u> s
1) Change	VP	FANEITE, ALEXANDER	9727 Costa del Sol Blvd
Add			Doral, Florida 33178
X Remove			
2) Change			
Add			
Remove Change			
Add			
Remove			
4) Change			
Add			
Remove			
5) Change			
Add			
Remove			
6) Change			
Add			
Remove			

If amending of (Attach addition	r <mark>adding additio</mark> ial sheets, if nece	<u>nal Articles,</u> ssary). (Be	enter change e specific)	e(s) here:				
N/P		<del></del>	<del></del>					
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If an amendm	ent provides for	an <u>exch</u> ange	e, <u>re</u> classifica	tion, or cance	ellation of issu	ied shares,		
provisions for	r implementing to blicable, indicate	he amendm	ent if not con	<u>itained in the</u>	amendment i	<u>itself:</u>		
	meame, manar	14771)						
<u> 4   N</u>								
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	doption:	, if other than the
date this document was signed.	W2621	
08/1 Effective date if applicable:	18/2021	
	(no more than 90 days after amendment file da	le)
Note: If the date inserted in this bedocument's effective date on the D	block does not meet the applicable statutory filing requirement of State's records.	ents, this date will not be listed as the
Adoption of Amendment(s)	( <u>CHECK ONE</u> )	
The amendment(s) was/were adaction was not required.	opted by the incorporators, or board of directors without share	eholder action and shareholder
☐ The amendment(s) was/were ad- by the shareholders was/were so	opted by the shareholders. The number of votes cast for the a afficient for approval.	umendment(s)
	proved by the shareholders through voting groups. The follow each voting group entitled to vote separately on the amendm	
"The number of votes cast	for the amendment(s) was/were sufficient for approval	
by		
	(voting group)	
08/18/202 Dated	1	
selecte	irector, president or other officer – if directors or officers haved, by an incorporator – if in the hands of a receiver, trustee, of ted tiduciary by that fiduciary)	
	Paola Donatiello	
	(Typed or printed name of person signing)	
	President	
	(Title of person signing)	

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