P21 0000 24661

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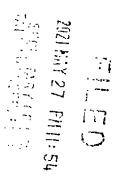
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COVER LETTER

TO: Amendment Section Division of Corpora	ions
NAME OF CORPORA	TION: MANO LIZA, INC.
DOCUMENT NUMBE	\bigcap \bigcap $1 \circ 0 \circ 0 \circ 0 \circ 1 \circ 1 \circ 1 \circ 1 \circ 1 \circ 1 \circ $
The enclosed Articles of	Imendment and fee are submitted for filing.
Please return all correspo	idence concerning this matter to the following:
	KAMILE SIRUKAITYTE Name of Contact Person REGISTERED ABENT Firm/ Company 7601 E TREASURE DR. APT 810 Address NORTH BAY VILLAGE, FL 33141 City/ State and Zip Code MARIUS. JASON 1 @ GMAIL. COM E-mail address: (to be used for future annual report notification)
For further information c	ncerning this matter, please call:
KAMILE S	IRUTKAITYTE at (786) 208-8745 Ontact Person Area Code & Daytime Telephone Number
En i sed is a check for th	following amount made payable to the Florida Department of State:
\$35 Filing Fee	S43.75 Filing Fee & S43.75 Filing Fee & S52.50 Filing Fee Certificate of Status (Additional copy is enclosed) S43.75 Filing Fee & S43.75 Filing Fee & Certificate of Status (Additional copy is enclosed)
Amenda	The Centre of Fundamenasee

Tallahassee, FL 32314

The Centre of Tallahassee 2415 N. Monroe Street, Suite 810

Tallahassee, FL 32303

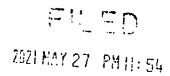
Articles of Amendment

to

Articles of Incorporation

MANO LIZA, INC.

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



(Name of Corporation as of	currently filed with the Florida Dept. of State)
P 210000	24661
	umber of Corporation (if known)
Pursuant to the provisions of section 607.1006, Florida Statuits Articles of Incorporation:	tes, this Florida Profit Corporation adopts the following amendment(s) to
A. If amending name, enter the new name of the corpora	ation:
N/A	The nac
name must be distinguishable and contain the word "corpora" "Inc.," or Co.," or the designation "Corp," "Inc," or "chartered," "professional association," or the abbreviation	The new painted the abbreviation "Corp" "Co". A professional corporation name must contain the word in "P.A."
B. Enter new principal office address, if applicable:	330 SUNNY ISLES BLUD
(Principal office address MUST BE A STREET ADDRESS	UNIT 5-1601
	Channis ISIES DEACH EI
	SUNNY ISLES BEACH, FL 33160
C. Enter new mailing address, if applicable:	33160
(Mailing address <u>MAY BE A POST OFFICE BOX</u>)	
	$\mathcal{N}A$
D. If amending the registered agent and/or registered off new registered agent and/or the new registered office	
Name of New Registered Agent	$\overline{N/\Delta}$
Name of New Regimered Agent	
	lorida street address)
	N/A Florida
New Registered Office Address;	(City) (Zip Code)
New Registered Agent's Signature, if changing Registered I hereby accept the appointment as registered agent. I am for	
N/A	
Signature o	f New Registered Agent, if changing
Check if applicable	

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	PT John D	<u>oe</u>	
X Remove	<u>V</u> <u>Mike Ja</u>	one <u>s</u>	
X Add	<u>SV</u> <u>Sally S</u>	mith_	
Type of Action (Check One)	<u>Title</u>	Name	<u>Addres</u> s
1) Change	<u>P</u>	KAMILE SIRUTKAIT	YTE
Add			
X Remove 2) Change	P	MARIUS J. JASON	330 SUNNY ISLES BLUD.
X Add			UNIT 5-1601
Remove 3) Change	_S_	MARIUS J. JASON	SUNNY ISLES BEACH, FL 33160
<u>X</u> Add			
Remove			1) 1/
4) Change			
Add			
Remove			
51 Change			
Add			
Remove			
6) Change			
Add			
Remove			

E. If amending or adding additional Articles, enter change(s) here: (Attach additional sheets, if necessary). (Be specific)
N/A

F. If an amendment provides for an exchange, reclassification, or cancellation of issued shares,
provisions for implementing the amendment if not contained in the amendment itself: (if not applicable, indicate $N/4$)
N/A

The date of each amendment(s) a date this document was signed.	idoption:	, if other than the
Effective date if applicable:	N/A	
	(no more than 90 days after amendment file da	(e)
Note: If the date inserted in this I document's effective date on the D	block does not meet the applicable statutory filing requirement partment 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 ad action was not required.	opted by the incorporators, or board of directors without share	cholder action and shareholder
The amendment(s) was/were ad by the shareholders was/were so	opted by the shareholders. The number of votes east for the a ufficient for approval.	mendment(s)
must be separately provided for	proved by the shareholders through voting groups. The follows reach voting group entitled to vote separately on the amendm	
must be separately provided for	r each voting group entitled to vote separately on the amendm t for the amendment(s) was/were sufficient for approval	
must be separately provided for	r each voting group entitled to vote separately on the amendm	
must be separately provided for "The number of votes cast by	t for the amendment(s) was/were sufficient for approval (voting group)	
must be separately provided for "The number of votes cast by Dated Signature (By a diselected)	r each voting group entitled to vote separately on the amendm t for the amendment(s) was/were sufficient for approval	ent(s):