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COVER LETTER

TO: Amendment Section Division of Corporati	ions	-	. , ,
NAME OF CORPORAT	TION: KAZA SER	WICE OPP	
DOCUMENT NUMBER	e: P210000 347	H	
The enclosed Articles of A	Amendment and fee are su	bmitted for filing.	
Please return all correspor	ndence concerning this ma	tter to the following:	
	nod Oiceay	M DES Name of Contact Persor	1
	Y 477	SAWICES LOLP	
		Firm/ Company	
	333C 5	W 4TH ST	
		Address	
	NEED CUDIN PE	ACH, PL, 33442	
	DCCK-ICO CC	City/ State and Zip Code	2
	AGENTS @MA	TOS INSIDANCE. ed for future annual report	con
	E-mail address: (to be us	ed for future annual report	notification)
For further information co	ncerning this matter, pleas	e call:	
<u>Lassio</u>	DMIDES	at (<u>404</u>	<u>) 396-28</u> 28
Name of C	ontact Person	Area Coo	de & Daytime Telephone Number
Enclosed is a check for the	e following amount made p	payable to the Florida Depa	ortment of State:
\$35 Filing Fee	☐\$43.75 Filing Fee & Certificate of Status	□\$43.75 Filing Fee & Certified Copy (Additional copy is enclosed)	□\$52.50 Filing Fee Certificate of Status Certified Copy (Additional Copy is enclosed)
	Address		Address
	nent Section		ment Section
P.O. Bo	i of Corporations x 6327		n of Corporations entre of Tallahassee
	see. FL 32314		I. Monroe Street, Suite 810
			ssee, FL 32303

Articles of Amendment to Articles of Incorporation of

KATT SELVICES COLF		
(Name of Corporation as currently fi	led with the Florida Dept. of State)	
121000034777		
(Document Number of Co	orporation (if known)	
Pursuant to the provisions of section 607.1006, Florida Statutes, this <i>Flo</i> its Articles of Incorporation:	rida Profit Corporation adopts the following	; amendment(s) to
A. If amending name, enter the new name of the corporation:		
		The new
name must be distinguishable and contain the word "corporation," "con "Inc.," or Co.," or the designation "Corp." "Inc," or "Co". A p "chartered," "professional association," or the abbreviation "P.A."	ipany," or "incorporated" or the abbreviation rofessional corporation name must contain	n "Corp.," the word
B. Enter new principal office address, if applicable: (Principal office address MUST BE A STREET ADDRESS)		
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)		
If amending the registered agent and/or registered office address new registered agent and/or the new registered office address:	s in Florida, enter the name of the	
new registered agent and/or the new registered office address.		
Name of New Registered Agent		
		-
(Florida street	addressj	
New Registered Office Address: (C	in), Florida(Zip C	oder
įc	my (b)	,,,,,,,
New Registered Agent's Signature, if changing Registered Agent: I hereby accept the appointment as registered agent. I am familiar wit	h and accept the obligations of the position.	21 NAT 24
Cinneting of Man. B.	istered Agent, if changing	- 710 11:4
Signature of New Reg	метви лучт, у спануту	č.

Check if applicable

 \Box The amendment(s) is/are being tiled pursuant 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: X Change	PT	John Doe	
X Remove	<u>V</u>	Mike Jones	
X Add	<u>sv</u>	Sally Smith	
Type of Action (Check One)	Title	Name	<u>Addres</u> s
1) Change	NP	LUCIANA GOMIDES	3330 SW 4TH ST ,
_ ⅓ Add			DETRAIDED BEACH,
Remove			FL, 33442
2) Change			
Add			
Remove 3) Change			
Add			·
Remove			
4) Change			
Add			
Remove			
5) Change			
Add			
Remove			
6) Change			
Add			
Remove			

	(Be specific)		
			
	change, reclassification, or	cancellation of issued shares	2
<u>f an amendment provides for an exc</u>		at the second second baselfs.	
provisions for implementing the am	<u>iendment if not contained i</u>	n the amenament itself:	
f an amendment provides for an exe provisions for implementing the an (if not applicable, indicate N/A)	nendment if not contained i	n the amendment itseit:	
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provisions for implementing the am	nendment if not contained i	n the amenament itself:	

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The date of eac	h amendment(s) adoption: 05/06/	2021	, if other than th
date this docume			
Effective date <u>i</u> t	applicable:		
	(no more than 90	days after amendment file date)	
	e inserted in this block does not meet the applicative date on the Department of State's records.	able statutory filing requirements, this dat	te will not be listed as th
Adoption of An	nendment(s) (CHECK ONE)		
The amendm action was no	ent(s) was/were adopted by the incorporators, or bit required.	mard of directors without shareholder actic	on and shareholder
	ent(s) was/were adopted by the shareholders. The holders was/were sufficient for approval.	number of votes cast for the amendment(s	s)
	ent(s) was/were approved by the shareholders thro rately provided for each voting group entitled to v		ent
"The n	imber of votes cast for the amendment(s) was/wer	re sufficient for approval	
bv	(voting group)		
·	(voting group)		
	Dated05/06/2021		
	Dated 05/06/2021 Signature 425500 Same	/mg	<u></u>
	(By a director, president of other office	er – if directors or officers have not been	
	selected, by an incorporator – it in the appointed fiduciary by that fiduciary)	e hands of a receiver, trustee, or other cour	Ţ
			
	KASSIO GOMIDO	<u>€</u> <u>S</u> name of person signing)	
	(Typed or printed n	name of person signing)	
	P		
	(Title of person sig	gning)	