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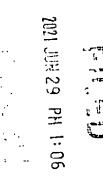
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## **COVER LETTER**

	COVERLETTER	
TO: Amendment Section 1 Division of Corporations		e e
NAME OF CORPORATION: <u>Sandu</u>	DICHERIE	MARIA
DOCUMENT NUMBER:	0038577	
The enclosed Articles of Amendment and fee are su	ibmitted for filing.	
Please return all correspondence concerning this ma	atter to the following:	
RAFAEL	J. Del F	200
	Name of Contact Perso	n
Sandia	vicherie	MARIA
	Firm/ Company	
13506 NE da	end Ct	
	Address	
North Mian	mi FL 3316 City/ State and Zip Cod	91
	City/ State and Zip Cod	le
<u>del pino i del</u> E-mail address: (10 be us	V gmail. eam sector future annual report	t notification)
For further information concerning this matter, pleas		
RAFAEL J. Del PIWO Name of Contact Person	a(786	, 406-3069
Name of Contact Person	Area Co	de & Daytime Telephone Number
Enclosed is a check for the following amount made	payable to the Florida Dep	artment of State:
S35 Filing Fee S43.75 Filing Fee & Certificate of Status	S43.75 Filing Fee & Certified Copy (Additional copy is enclosed)	☐S52.50 Filing Fee Certificate of Status Certified Copy (Additional Copy is enclosed)
Mailing Address Amendment Section Division of Corporations P.O. Box 6327	Ameno Divisio	Address Iment Section on of Corporations entre of Tallahassee

2415 N. Monroe Street, Suite 810

Tallahassee, FL 32303

Tallahassee, FL 32314

## Articles of Amendment to Articles of Incorporation of

		01			
SANDWICHE	ERIE M	1ARIA			
(Name of C	orporation as curre	ently filed with the F	lorida Dept. of State)		
and the second	Pal	0000 38.	577		
		er of Corporation (if l			
Pursuant to the provisions of section 607.1006 its Articles of Incorporation:	6, Florida Statutes, t	his <i>Florida Profit Co</i>	rporation adopts the fo	ollowing amendmen	t(s) t
A. If amending name, enter the new name	of the corporation	<u>:</u>			
SANDWICHE	ERIA /	MARIA.	Inc.	The new	
SAND WICHE name must be distinguishable and contain the "Inc.," or Co" or the designation "Corp "chartered," "professional association," or t	, " "Inc, " or "Co"	. A professional co	corporated" or the abb rporation name must	reviation "Corp.," contain the word	
B. Enter new principal office address, if a Principal office address <u>MUST BE A STRE</u>				1021	74
					: 3 ::12 ::48 ::48
C. Enter new mailing address, if applicab (Mailing address MAY BE A POST OF)				9 PH 1: 06	
D. If amending the registered agent and/or new registered agent and/or the new re			nter the name of the		
Name of New Registered Agent					
	(Floride	i street address)			
New Registered Office Address:			, Florida_		
		(City)		(Zip Code)	

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

I hereby 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)

Add

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 <u>PT</u> John Doe X Remove Mike Jones X Add <u>SV</u> Sally Smith Type of Action Title Name Address (Check One) VP Elizabeth R. Mugura 13506 NE 2340Ct 1) \_\_\_\_ Change NORTH MIAMI TE 33181 ✓ Add \_\_\_\_ Remove 2) \_\_\_\_ Change \_\_\_\_ Add Remove 3) \_\_\_\_ Change \_\_\_\_ Add \_\_\_\_ Remove 4) \_\_\_\_ Change \_\_\_\_ Add Remove 5) \_\_\_\_ Change Add \_\_\_\_ Remove 6) \_\_\_\_ Change

	adding additional Art al sheets, if necessary).	(Be specific)			
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an amendmer	nt provides for an exch	iange reclassificat	ion or cancellation	of issued shares	
	implementing the ame	ndment if not con	tained in the amend	ment itself:	
<u>rovisions</u> for i	icable, indicate N/A)				
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	6/14/21	
The date of each amendment(s) adopt date this document was signed.	ion:6/14/21	, if other than the
Effective date if applicable:	6/14/31	
	(no more than 90 days after amendment file date)	
<b>Note:</b> If the date inserted in this block document's effective date on the Depart	does not meet the applicable statutory filing requirements, this dement of State's records.	ate will not be listed as the
Adoption of Amendment(s)	(CHECK ONE)	
The amendment(s) was/were adopted action was not required.	by the incorporators, or board of directors without shareholder act	ion and shareholder
☐ The amendment(s) was/were adopted by the shareholders was/were suffici	by the shareholders. The number of votes cast for the amendment ent for approval.	(s)
must be separately provided for each	ed by the shareholders through voting groups. The following statem is voting group entitled to vote separately on the amendment(s):	eent
	he amendment(s) was/were sufficient for approval	
by	(voting group)	
Dated	6/14/21	
Signature	(1) (h) h)	
selected, by	or, president or ether officer – if directors or officers have not been an incorporator – if in the hands of a receiver, trustee, or other couduciary by that fiduciary)	rt
	RAFAEL J. Del Pino	
	(Typed or printed name of person signing)	
	$\rho$	
	·	