P210000 44085

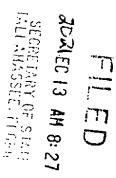
(Requestor's Name)				
(Address)				
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(Document Number)				
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J. HORNE JAN - 3 2022				

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COVER LETTER

	e .	COVERLETTER				
TO: Amendment Sec Division of Corp						
NAME OF CORPO	RATION: ISABIRI CORP					
	BER; P21000044085					
	s of Amendment and fee are su	bmitted for filing.				
Please return all corre	espondence concerning this ma	tter to the following:				
	CARLA CARRAI					
		Name of Contact Person	<u> </u>			
	CNC CERTIFIED PUBLIC ACCOUNTANT					
	Firm/ Company					
	3401 SW 160th AVE, STE 3	• •				
	Address					
	MIRAMAR, FL 33027					
		City/ State and Zip Code	<u>e</u>			
	dmedina@encpas.com					
	E-mail address: (to be us	sed for future annual report	notification)			
For further information	on concerning this matter, plea	se call:				
CARLA		at (<u>305</u>	279.3686			
Name	of Contact Person	Area Co	de & Daytime Telephone Number			
Enclosed is a check for	or the following amount made	payable to the Florida Depa	artment of State:			
■ \$35 Filing Fee	☐\$43.75 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

Street Address Amendment Section Division of Corporations The Centre of Tallahassee

Articles of Amendment to Articles of Incorporation of

FILED
OZIDEC 13 AM 8: 28

	ZUZI DEU 13 AM 8
ently filed with the Flo	orida Dept. of State) SECRETARY OF ST
	and which is the second of the
er of Corporation (if kn	iown)
his <i>Florida Profit Corp</i>	noration adopts the following amendment(s) to
<u>:</u>	
	The new
. A professional corp	orporated" or the abbreviation "Corp.," poration name must contain the word
	<u></u>
v	
	ter the name of the
<u>C55.</u>	
-	
street address)	
	, Florida
-	er of Corporation (if kn his Florida Profit Corp

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 $\overline{\mathbf{b}}$ John Doc X Remove \underline{V} Mike Jones <u>X</u> Add <u>SV</u> Sally Smith Type of Action Title Address Name | (Check One) PARALAX, INC 12550 BISCAYNE BLVD, STE 406 1) Change X Add MIAMI, FL 33181 ___ Remove 2) Change ____ Add Remove 3) Change Add __ Remove 4) ____ Change ____ Add ____ Remove 5) _____ Change ____ Add Remove 6) ____ Change

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

The date of each amendment(s) adoption:	, if other than the
date this document was signed.	
Effective date if applicable:	
(no more than 90 days after amendment file date)	
Note: If the date inserted in this block does not meet the applicable statutory filing requirements, this dadocument's effective date on the Department of State's records.	ite will not be listed as the
Adoption of Amendment(s) (CHECK ONE)	
☐ The amendment(s) was/were adopted by the incorporators, or board of directors without shareholder action was not required.	on and shareholder
The amendment(s) was/were adopted by the shareholders. The number of votes cast for the amendment by the shareholders was/were sufficient for approval.	(s)
☐ The amendment(s) was/were approved by the shareholders through voting groups. The following statem must be separately provided for each voting group entitled to vote separately on the amendment(s):	ent
"The number of votes cast for the amendment(s) was/were sufficient for approval	
by	
(voting group)	
Dated	
(By a director, president or other-officer – if directors or officers have not been selected, by an incorporator – if in the hands of a receiver, trustee, or other courappointed fiduciary by that fiduciary)	rt
- Yuly areas	
(Typed or printed name of person signing)	
(Title of person signing)	