P210000H7743

(Requestor's Name)
(Address)
(Address)
(City/State/Zip/Phone #)
(Only/State/Zip/Fillone #)
PICK-UP WAIT MAIL
(Business Entity Name)
(Document Number)
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A. RAMSEY NOV 0 8 2021

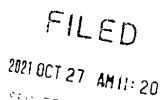
COVER LETTER

TO: Amendment Section Division of Corporations

NAME OF CORPO	ORATION: PERSEO CORP					
	MBER: P21000047743					
	es of Amendment and fee are su	ibmitted for filing.				
Please return all cor	respondence concerning this ma	atter to the following:				
	ARIEL KORUK					
	Name of Contact Person					
	0054 REALTY					
		Firm/ Company				
	2200 NE 123RD ST					
		Address				
	NORTH MIAMI, FL, 33181					
	,	City/ State and Zip Cod	e			
	ARIEL@0054REALTY.CO	·				
		sed for future annual report				
For further informat ARIEL KORUK	ion concerning this matter, plea	se call:	8043205			
Name	e of Contact Person		de & Daytime Telephone Number			
Enclosed is a check	for the following amount made		•			
S35 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)			
Mailing Address			Address			
	nendment Section vision of Corporations	Amendment Section				
	D. Box 6327	Division of Corporations The Centre of Tallahassee				
Tallahassee, FL 32314		2415 N. Monroe Street, Suite 810				

Tallahassee, FL 32303

Articles of Amendment to Articles of Incorporation of



PERSEO CORP

(Name of Corporation as current	tly filed with the Florida Dept. of State).
P21000047743	12. 2011 2 12/16
(Document Number of	of Corporation (if known)
Pursuant to the provisions of section 607.1006, Florida Statutes, this its Articles of Incorporation:	Florida Profit Corporation adopts the following amendment(s)
A. If amending name, enter the new name of the corporation:	
	The new
name must be distinguishable and contain the word "corporation," ' "Inc.," or Co.," or the designation "Corp," "Inc," or "Co". "chartered," "professional association," or the abbreviation "P.A.	A professional corporation name must contain the word
D. Catanana mainsinal office address: if smalleshies	N/A
B. Enter new principal office address, if applicable: (Principal office address MUST BE A STREET ADDRESS)	-
C. Enter new mailing address, if applicable:	N/A
(Mailing address MAY BE A POST OFFICE BOX)	•
D. If amending the registered agent and/or registered office add	tracs in Florida unter the name of the
new registered agent and/or the new registered office addres	
Name of New Registered Agent	
(Florida st	reet address)
New Registered Office Address:	. Florida
New Registered Office Address.	(City) (Zip Code)
New Registered Agent's Signature, if changing Registered Agen I hereby accept the appointment as registered agent. I am familiar	
,	The position
	D
Signature of New I	Registered Agent, if changing

Check if applicable

The amendment(s) is/are being filed 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)

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	<u>PT</u>	John Doe		
X Remove	$\underline{\mathbf{V}}$	Mike Jones		
X Add	<u>sv</u>	Sally Smith		
Type of Action (Check One)	Title	Name	<u>Addres</u> s	
1) Change	P	TWO BRAINS LLC	8 THE GREEN, STE A	
Add			DOVER, DE, 19901	
X Remove			USA	
2) Change	Р	ARIEL E. KORUK	2200 NE 123RD ST,	
X Add			NORTH MIAMI, FL, 33181	
Remove 3) Change			USA	
Add				
Remove				
4) Change			<u> </u>	
Add				
Remove				
5) Change				
Add				
Remove				
6) Change		·		
Add				
Remove				

Attach additional sheets, if necessary).	icles, enter change(s) here: (Be specific)
	 .
	· · · · · · · · · · · · · · · · · · ·
····	
	
	-
provisions for implementing the ame	hange, reclassification, or cancellation of issued shares, endment if not contained in the amendment itself:
(if not applicable, indicate N/A)	

	OCT 10/2021			
The date of each amendment(s) ado	ption:		 	, if other than the
date this document was signed.				
OCT 1 Effective date <u>if applicable</u> :	0/2021			
meetive date mappingable.	(no more t	han 90 days after	r amendment file d	ate)
Note: If the date inserted in this blo locument's effective date on the Department.	ck does not meet the artment of State's reco	applicable statut ords.	ory filing requiren	pents, this date will not be listed as the
Adoption of Amendment(s)	(CHECK ONE))		
The amendment(s) was/were adopt action was not required.	ted by the incorporator	rs, or board of dir	rectors without sha	reholder action and shareholder
☐ The amendment(s) was/were adopt by the shareholders was/were suff		s. The number of	f votes cast for the	amendment(s)
The amendment(s) was/were appromust he separately provided for ed	oved by the shareholde ach voting group entitle	ers through voting led to vote separa	g groups. The follo ttely on the amends	wing statement ment(s):
"The number of votes east fo	r the amendment(s) wa	as/were sufficien	t for approval	
by				
,	(voting group)		·	
selected, appointed	ctor, president or other by an incorporator if I fiduciary by that fiduciary	in the hands of a	ctors or officers ha receiver, trustee,	ve not been or other court
^	RIEL EDUARDO KO	\		
	(Typed or pri	inted name of per	son signing)	
PI	RESIDENT			

(Title of person signing)