P2 | 000054095

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LALBRITTON

A. ...

COVER LETTER

TO: Amendment Section Division of Corporations

SAME OF CORPORATE	ON:INVER	SIONES PAY PAZ CORI		
DOCUMENT NUMBER:		N2100003631		
The enclosed Articles of An	<i>rendment</i> and fee are su	bmitted for filing.		
Please return all correspond	ence concerning this ma	tter to the following:		
		GUILLERMO IGLESIA	¢.	
			·	
		Name of Contact Perso		
		BEST ACCOUNTING I	NC	
		Firm/ Company		
	 	10200 NW 25th ST., STI	b. # 209	
		Address		
	_	DORAL, FL. 33172-5	5922 	
		City/ State and Zip Coc	le	
		bestacc8500@gmail.co	om	
	E-mail address: (to be us	sed for future annual repor	t notification)	
or further information cond		se call:at (471-7545	
Name of Cor	ntact Person	ar (Area Co) ode & Daytime Telephone Number	
nclosed is a check for the I	following amount made	payable to the Florida Dep	partment of State:	
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 A	Address ent Section		Address dment Section	
	of Corporations	Division of Corporations		
P.O. Box	6327		Centre of Tallahassee	
Tallahasse	ee, FL 32314	2415 N. Monroe Street, Suite 810		

Tallahassee, FL 32303

Articles of Amendment to

Articles of Incorporation of

INVERSIONES PAY PAZ CORP

(Name of Corporation as currently filed with the Florida Dept. of State) P21000054095 (Document Number of Corporation (if known) Pursuant to the provisions of section 607,1006, Florida Statutes, this Florida Profit Corporation adopts the following amendment(s) to its Articles of Incorporation: A. If amending name, enter the new name of the corporation: name must be distinguishable and contain the word "corporation," "company," or "incorporated" or the abbreviation "Corp.." "Inc.," or Co.," or the designation "Corp." "Inc." or "Co". A professional corporation name must contain the word "chartered," "professional association," or the abbreviation "P.A." 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 address in Florida, enter the name of the new registered agent and/or the new registered office address: Name of New Registered Agent (Florida street address) New Registered Office Address: (City) (Zip Code) New Registered Agent's Signature, if changing Registered Agent: Thereby accept the appointment as registered agent. I am familiar with and accept the obligations of the position.

Signature of New 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>	<u>John Do</u>	<u>e</u>		
X Remove	$\underline{\mathbf{V}}$	Mike Jones			
<u>X</u> Add	<u>SV</u>	Sally Sn	<u>uth</u>		
Type of Action (Check One)	Title		Name	Address	
1) Change	D		LUZ M PAZ	10200 NW 25th ST., STE. # 209	
AddX Remove				DORAL, FL. 33172-5922	
2) Change		_			
Add Remove 3) Change Add	_	_			
Remove 4) Change Add		_			
Remove 5)ChangeAdd		_	1		
Remove 6) Change Add		_			
Remove					

Attach additional sl	ling additional Art neets, if neccssary).	(Be specific)				
N/A						
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	_ · ·					
<u> </u>	. <u> </u>					
				-		
<u>f an amendment p</u>	<u>rovides for an exc</u>	hange, reclassif	ication, or canc	ellation of issu	ed shares,	
provisions for imp	dementing the am	endment if not	<u>contained in the</u>	<u>e amendment i</u>	tself:	
	ne, maicaie ivizi)					
N/A						
					-	
		-	· · · · · · · · · · · · · · · · · · ·	· · <u></u>		
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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 appli- document's effective date on the Department of State's records.	icable statutory filing requirements, this date will not be listed as the
Adoption of Amendment(s) (CHECK ONE)	
The amendment(s) was/were adopted by the incorporators, or action was not required.	board of directors without shareholder action and shareholder
☐ The amendment(s) was/were adopted by the shareholders. The by the shareholders was/were sufficient for approval.	ne number of votes cast for the amendment(s)
The amendment(s) was/were approved by the shareholders the must be separately provided for each voting group entitled to	
"The number of votes cast for the amendment(s) was/wa	ere sufficient for approval
by	··
(voting group)	
06/28/2021 Dated	
Signature Vote Lower collect.	
	cer – if directors or officers have not been ne hands of a receiver, trustee, or o ther court ')
JOSE L PAY	YERAS
(Typed or printed	name of person signing)
υ	
(Title of person si	gning)

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