P21000055018

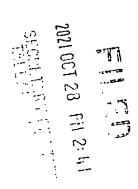
(Requestor's Name)			
(Address)			
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PICK-UP WAIT MAIL			
(Business Entity Name)			
(Document Number)			
Certified Copies Certificates of Status			
Special Instructions to Filing Officer:			
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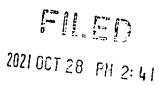
COVER LETTER,

TO: Amendment Section Division of Corporations

NAME OF CORPO	RATION: CLOVIS & VALE	DELICE INC	
DOCUMENT NUM	P21000055018		
The enclosed Articles	of Amendment and fee are su	bmitted for filing.	
Please return all corre	spondence concerning this ma	itter to the following:	
	RODRIGO P SILVA		
		Name of Contact Person	1
	RS ACCOUNTING AND TA	AX SERVICES INC	
		Firm/ Company	
	10 FAIRWAY DRIVE STE	• •	
	·	Address	
	DEERFIELD BEACH, FL 3	3441	
		City/ State and Zip Code	2
	info@rsaccountingtax.com		
	-	sed for future annual report	notification)
For further informatio	n concerning this matter, plea	954	、623-7615
Name	of Contact Person	at (at Co-	
Enclosed is a check for	or the following amount made	payable to the Florida Depa	irtment of State:
\$35 Filing Fee	☐\$43.75 Filing Fee & Certificate of Status	S43.75 Filing Fee & Certified Copy (Additional copy is enclosed)	☐\$52.50 Filing Fee Certificate of Status Certified Copy (Additional Copy is enclosed)
Am Div P.O	iling Address endment Section ision of Corporations . Box 6327 ahassee, FL 32314	Amend Divisio The Co	Address ment Section n of Corporations entre of Tallahassee J. Monroe Street, Suite 810

Tallahassee, FL 32303

Articles of Amendment to Articles of Incorporation of



	CLOVIS & VAL	DELICE INC	SECOLA: -
(Name o	of Corporation as current	ly filed with the Flor	ida Dept. of State)
	P210000	055018	• • • • • • • • • • • • • • • • • • • •
 	(Document Number o	of Corporation (if know	vn)
Pursuant to the provisions of section 607, its Articles of Incorporation:	.1006, Florida Statutes, this	Florida Profit Corpo	ration adopts the following amendment(s) to
A. If amending name, enter the new na	ame of the corporation:		
	CLOVES & VALDELIO	CE INC	The new
name must be distinguishable and contain "Inc.," or Co.," or the designation "C "chartered," "professional association,"	Corp. " "Inc." or "Co"	A professional corpo	orated" or the abbreviation "Corp."
B. Enter new principal office address, (Principal office address MUST BE A S		N/A	,,,,,,,,,
C. Enter new mailing address, if appli (Mailing address MAY BE A POST) D. If amending the registered agent an new registered agent and/or the new Name of New Registered Agent	OFFICE BOX) ad/or registered office add		the name of the
Same of New Regissered Agem			
	(Florida st	reet address)	
New Registered Office Address:	N/A		. Florida
new registere emice rathess.		(Ciņy	(Zip Code)
New Registered Agent's Signature, if c	ered agent. I am familiar	t: with and accept the of Registered Agent, if ch	
Charlett and talls	g	American Marin y am	······································
Chack if annlicable			

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)

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	$\underline{\mathbf{V}}$	Mike Jones	
X Add	<u>SV</u>	Sally Smith	
Type of Action (Check One)	<u>Title</u>	<u>Name</u>	Address
1) X Change	P	CLOVES ANDRADE	105 NW 50TH CT
Add			POMPANO BEACH FL 33064
Remove			
2) Change		_ \	
Add			
Remove 3) Change			
Add			
Remove			
4) Change			
Add			
Remove			
5) Change		<u> </u>	_ \
Add			<u></u>
Remove			
6) Change		_	
Add			
Remove			

F. If amending or adding additional Articles, enter change(s) here: (Attach additional sheets, if necessary) (Be specific)	
N/A	
	_
,	
	
F. 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)	
N/A	
	<u> </u>
)	

date this document was sig	ned.
Effective date if applicat	le:
	(no more than 90 days after amendment file date)
	in this block does not meet the applicable statutory filing requirements, this date will not be listed as the Department of State's records.
Adoption of Amendmen	(s) (<u>CHECK ONE</u>)
The amendment(s) was action was not required	were adopted by the incorporators, or board of directors without shareholder action and shareholder
	/were adopted by the shareholders. The number of votes cast for the amendment(s) s/were sufficient for approval.
	were approved by the shareholders through voting groups. The following statement vided for each voting group entitled to vote separately on the amendment(s):
"The number of	otes cast for the amendment(s) was/were sufficient for approval
by	(voting group)
	(voting group)
Dated_	10/20/2021.
Signatu	
	(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 court appointed fiduciary by that fiduciary)
	CLOVES ANDROVE
	(Typed or printed name of person signing)
	PAST DONA
	(Title of person signing)