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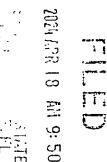
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COVER LETTER

TO: Amendment Section Division of Corporations

NAME OF CORPORATION: ADM	IINISTRACION Y N	NEGOCIOS CORP.			
DOCUMENT NUMBER: P2100006					
The enclosed Articles of Amendment	and fee are submitted	d for filing.			
Please return all correspondence conce	erning this matter to	the following:			
ALFONSO GU	TIERREZ				
-	Nai	ne of Contact Person			
ADMINISTRA	ADMINISTRACION Y NEGOCIOS CORP.				
	 -	Firm/ Company			
1840 W 49 th S	t Suite 712	Time Company			
		Address			
Hialeah, Fl. 330)12				
	City/ State and Zip Code				
amgtaxservices	@yahoo.com.mx				
E-mail add	ress: (to be used for	future annual report	notification)		
For further information concerning thi ALFONSO GUTIERREZ	·	,786	3825831		
Name of Contact Person		at (Area Cod) 3825831 le & Daytime Telephone Number		
Enclosed is a check for the following a					
**	te of Status Co	43.75 Filing Fee & crtified Copy dditional copy is closed)	□\$52.50 Filing Fec Certificate of Status Certified Copy (Additional Copy is enclosed)		
Mailing Address Amendment Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314		Street Address Amendment Section Division of Corporations The Centre of Tallahassee 2415 N. Monroe Street, Suite 810			

Tallahassee, FL 32303

Articles of Amendment to Articles of Incorporation of

ADMINISTRACION Y NEGOCIOS CORP.

FILED

TISHING THE COLOR OF THE COLOR			424, (_2)
(Name of Corporati	ion as currently filed with the Florida De	pt. of State) PR 19	AH OLEO
21000061468		-02171 H 10	HI 2: 20
(Docu	ment Number of Corporation (if known)	7.1.1.1	- SINTE
ursuant to the provisions of section 607.1006. Florid Articles of Incorporation:	a Statutes, this Florida Profit Corporation		
. If amending name, enter the new name of the c	corporation:		
ame must be distinguishable and contain the word "c Inc.," or Co.," or the designation "Corp," "Inc, chartered," "professional association," or the abbro	" or "Co". A professional corporation	l" or the abbreviation	
. Enter new principal office address, if applicable	<u>e:</u>		
rincipal office address <u>MUST BE A STREET AD</u>	DRESS)		
Enter new mailing address, if applicable:			
(Mailing address <u>MAY BE A POST OFFICE BO</u>	<u></u>		
. If amending the registered agent and/or registe		ame of the	
new registered agent and/or the new registered	office address:		
Name of New Registered Agent			
	(Florida street address)		
New Registered Office Address:		. Florida	
New Registerea Office Address.	(City)	, Pionua (Zip Cod	<u></u> de)
ew Registered Agent's Signature, if changing Re	gistered Agent:		
hereby accept the appointment as registered agent.		ons of the position.	
Sign	nature 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>	John Doe	
X Remove	<u>V</u>	Mike Jones	
X Add	<u>SV</u>	Sally Smith	
Type of Action (Check One)	<u>Title</u>	<u>Name</u>	<u>Addres</u> s
1) Change	V/P	MARIA C GARCIA	1840 W 49TH ST
Add			SUITE 712
X Remove			HIALEAH, FL. 33012
2) Change			·
Add			
Remove Change			
Add			
Remove			
4) Change			
Add			
Remove			
5) Change			
Add			
Remove			
6) Change			
Add			
Romano			

	rticles, enter change(s) here:). (Be specific)
	<u> </u>
	_
	<u></u>
f an amendment provides for an ex	schange, reclassification, or cancellation of issued shares,
provisions for implementing the an	mendment if not contained in the amendment itself:
f an amendment provides for an ex provisions for implementing the an (if not applicable, indicate N/A)	mendment if not contained in the amendment itself:
provisions for implementing the an	mendment if not contained in the amendment itself:
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• • •	04/08/202	24	
The date of each amendmen			, if other than the
date this document was signed	- 04/08/2024		
Effective date if applicable:			
	(no m	nore than 90 days after amendment file date)	
Note: If the date inserted in document's effective date on t		et the applicable statutory filing requirements is records.	, this date will not be listed as the
Adoption of Amendment(s)	(CHECK)	ONE)	
The amendment(s) was/we action was not required.	re adopted by the incorpo	porators, or board of directors without shareho	lder action and shareholder
☐ The amendment(s) was/we by the shareholders was/w		nolders. The number of votes east for the ame	ndment(s)
		cholders through voting groups. The following pentitled to vote separately on the amendment	
"The number of vote	s cast for the amendment	nt(s) was/were sufficient for approval	
by		.**	
	(voting gro	oup)	
04/08 Dated	/2024		
Signature _			
S		or other officer – if directors or officers have n tor – if in the hands of a receiver, trustee, or of at fiduciary)	
	ALFONSO GUTI	IERREZ	
	(Typed	1 or printed name of person signing)	
	PRESIDENT		
	(Title o	of person signing)	