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2021 JUL 30 PH 2: 18

A. Butler

COVER LETTER

TO: Amendment Section

Division of Corporations

Tallahassee, Fl. 32314

NAME OF CORPORATION: _____ Modular Top Corp DOCUMENT NUMBER: P21000068061 The enclosed Articles of Amendment and fee are submitted for tiling. Please return all correspondence concerning this matter to the following: Michael Mesa Name of Contact Person Mesa & Mesa Accounting & Tax Services Firm/ Company 2441 NW 93 Ave Suite 101 Address Doral, FL 33172 City/ State and Zip Code mike@mesa-mesa.com E-mail address: (to be used for future annual report notification) For further information concerning this matter, please call: Michael Mesa at ($\frac{305}{\text{Area Code & Daytime Telephone Number}}$ Name of Contact Person Enclosed is a check for the following amount made payable to the Florida Department of State: ☐ \$35 Filing Fee □\$43.75 Filing Fee & ■\$43.75 Filing Fee & \$52.50 Filing Fee Certificate of Status Certified Copy Certificate of Status (Additional copy is Certified Copy enclosed) (Additional Copy is enclosed) Mailing Address Street Address Amendment Section Amendment Section Division of Corporations Division of Corporations P.O. Box 6327 The Centre of Tallahassee

2415 N. Monroe Street, Suite 810

Tallahassee, FL 32303

Articles of Amendment to Articles of Incorporation of

FILED

Modular Top Corp	2021JUL 30 PH 2: 18
(Name of Corporation as c	currently filed with the Florida Dept. of State)
P21000068061	SEGRE WALL OF STATE
(Document Nu	umber of Corporation (if known)
Pursuant to the provisions of section 607.1006, Florida Statute its Articles of Incorporation:	tes, this Florida Profit Corporation adopts the following amendment(s) to
A. If amending name, enter the new name of the corporat	tion:
	The new
	tion," "company," or "incorporated" or the abbreviation "Corp.," Co". A projessional corporation name must contain the word
B. Enter new principal office address, if applicable: (Principal office address <u>MUST BE A STREET ADDRESS</u>	<u> </u>
	·
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BON)	
D. If amending the registered agent and/or registered offi	ice address in Florida, enter the name of the
new registered agent and/or the new registered office a	
Name of New Registered Agent	
$G^{*}h$	lorida street address)
New Registered Office Address:	. Florida
	(City) (Zip Code)
New Registered Agent's Signature, if changing Registered	d Agent
I hereby accept the appointment as registered agent. I am fa	
Signature of	f New Registered Agent, if changing
ingrature by	Note that the second se

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

<u>X</u> Change	<u>121</u>	Joun 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	D	Luis Toledo Bustamante	1801 SW 3 Ave Suite 390
Add			Miami, FL 33129
X Remove			
2) Change	D,P	Luis A. Toledo Barcenas	1801 SW 3 Ave Suite 390
Add Add			Miami, FL 33129
Remove 3 1 Range		_	
Add			
Remove			
4) Change		_	
Add			
Remove			.
5) Change			
Add			
Remove			
6) Change			
Add			
Remove			
Remove			

1. Come is the contract of the contract of	cles, enter change(s) here: (Be specific)
, - H -	
<u> </u>	
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If an amendment provides for an exch	ange, reclassification, or cancellation of issued shares,
provisions for implementing the ame	ndment if not contained in the amendment itself:
(if not applicable, indicate N/A)	
(if not applicable, indicate N/A)	
(if not applicable, indicate N/A)	
(if not applicable, indicate N/A)	
(if not applicable, indicate NA)	
(if not applicable, indicate N/A)	

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	July 29, 2021
The date of each amendment(s) date this document was signed.	adoption:, if other than the
	ly 29, 2021
Effective date <u>if applicable</u> :	(no more than 90 days after amendment file date)
Note: If the date inserted in this document's effective date on the I	block does not meet the applicable statutory filing requirements, this date will not be listed as the Department of State's records.
Adoption of Amendment(s)	(CHECK ONE)
☐ The amendment(s) was/were a action was not required.	dopted by the incorporators, or board of directors without shareholder action and shareholder
The amendment(s) was/were a by the shareholders was/were	dopted by the shareholders. The number of votes cast for the amendment(s) sufficient for approval.
	pproved by the shareholders through voting groups. The following statement or each voting group entitled to vote separately on the amendment(s):
"The number of votes ca	st for the amendment(s) was/were sufficient for approval
by	, -
	(voting group)
Dated	29/2021
selec	director, president or other officer – if directors or officers have not been left, by an incorporator – if in the hands of a receiver, trustee, or other court attend fiduciary by that fiduciary)
	Luís A Toledo Barcenas
	(Typed or printed name of person signing)
	President
	(Title of person signing)