P21000075547

| (Requestor's Name) |
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COVER LETTER

TO: Amendment Section

Division of Corporations

| NAME OF CORPOR | ATION: CUBANLINK GO | LD JEWELRY | ' CORP | | | |
|---------------------------|---|--|------------------------------|---|--|--|
| DOCUMENT NUMB | D31000035543 | | | | | |
| The enclosed Articles of | f Amendment and fee are sul | bmitted for fili | ng. | | | |
| Please return all corresp | ondence concerning this mat | iter to the follo | wing: | | | |
| J | HON RODRIGUEZ | | | | | |
| | · | Name of Co | ontact Person | | | |
| J | TREH MULTISERVICES LI | LC | | | | |
| _ | Firm/ Company | | | | | |
| - | 8095 S MILITARY TRAIL S | TE 4 | | | | |
| | • | Ade | dress | | | |
| LAKE WORTH | | | | | | |
| - | | City/ State : | ınd Zip Code | | | |
| j | irehmulti@gmail.com | | | | | |
| _ | E-mail address: (to be us | ed for future a | nnual report | notification) | | |
| For further information | concerning this matter, pleas | e call: | | | | |
| JHON RODRIGUEZ | | at (| 561 | 5749110 | | |
| Name of | Contact Person | | Area Cod | le & Daytime Telephone Number | | |
| Enclosed is a check for | the following amount made p | payable to the | Florida Depa | rtment of State: | | |
| ■ \$35 Filing Fee | ☐\$43.75 Filing Fee & Certificate of Status | S43.75 Fi Certified ((Additional enclosed) | Сору | ☐\$52.50 Filing Fee Certificate of Status Certified Copy (Additional Copy is enclosed) | | |
| Amer Divis P.O. I | ng Address adment Section ion of Corporations Box 6327 nassee, FL 32314 | | Amendi Division The Ce | Address ment Section n of Corporations entre of Tallahassee L. Monroe Street, Suite 810 | | |

Tallahassee, FL 32303

Articles of Amendment to Articles of Incorporation of

| | | of Amendment to f Incorporation of | | MA OCT |
|--|--------------------------------------|--|---------------------|---------------------------|
| CUBANLINK GOLD JEWELRY CORE | , | | | 18 CS 18 |
| (Name o | of Corporation as curr | ently filed with the Flo | orida Dept. of Stat | e) (C) 3 |
| P21000075547 | | | | 15 S S |
| | (Document Numb | per of Corporation (if kn | own) | 2 |
| Pursuant to the provisions of section 607, its Articles of Incorporation: | .1006, Florida Statutes, | this Florida Profit Corp | ooration adopts the | following amendment(s) to |
| A. If amending name, enter the new n | ame of the corporation | <u>ı:</u> | | |
| | | | | <i>The new</i> |
| name must be distinguishable and contain "Inc.," or Co.," or the designation "Coartered," "professional association." | Corp," "Inc," or "Co" | ". A professional corp | | |
| B. Enter new principal office address, (Principal office address MUST BE A S | | | · | |
| C. Enter new mailing address, if appl (Mailing address MAY BE A POST) D. If amending the registered agent are new registered agent and/or the new registered agent and/or the new registered agent. | OFFICE BOX) nd/or registered office | | er the name of the | |
| new registered agent and/or the new | JIREH MULTISERVI | = | | |
| Name of New Registered Agent | | | | |
| | 3095 S MILITARY TI | | | |
| | | la street address) | | 224/2 |
| New Registered Office Address: | LAKE WORTH | | Florida | 33463 (Zip Code) |
| | | (City) | | (Zip Code) |
| New Registered Agent's Signature, if c I hereby accept the appointment as regist | tered agent. I am famil | gent: liar with and accept the GW ew Registered Agent, if a | | vosition. |
| Check if annlicable | Signaline by Jie | regissered rigent, if C | . ампунц | |

 \Box 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 Do | <u>De</u> | | |
|----------------------------|-----------|------------|--------------------------------|--------------------------|--|
| X Remove | <u>V</u> | Mike Jones | | | |
| X Add | <u>sv</u> | Sally Si | nith | | |
| Type of Action (Check One) | Title | | Name | <u>Addres</u> s | |
| 1) Change | D | _ | Alcides Jesus Cabrera Gonzalez | 5417 Trevor Cir Apt 104 | |
| X Add | | | | West Palm Beach FL 33417 | |
| Remove | | | | | |
| 2) Change | | | | | |
| Add | | | | | |
| Remove Change | | _ | | | |
| Add | | | | | |
| Remove | | | | | |
| 4) Change | | _ | | | |
| Add | | | | | |
| Remove | | | | | |
| 5) Change | | _ | | | |
| Add | | | | . | |
| Remove | | | | | |
| 6) Change | | _ | | | |
| Add | | | | | |
| Remove | | | | | |

| If amen | ding or adding additional Articles, enter change(s) here: |
|-----------------|--|
| (Attach a | dditional sheets, if necessary). (Be specific) |
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| <u>If an an</u> | nendment provides for an exchange, reclassification, or cancellation of issued shares, |
| provisi | ons for implementing the amendment if not contained in the amendment itself: not applicable, indicate N/A) |
| (1) | noi appacanie, maicate wa) |
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| The day of the law of the second | 10/11/2021 | |
|---|---|--|
| The date of each amendment(s) date this document was signed. | adoption; | , if other than the |
| Effective date if applicable: | 10/31/2021 | |
| | (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 department of State's records. | date will not be listed as the |
| Adoption of Amendment(s) | (<u>CHECK ONE</u>) | |
| ☐ The amendment(s) was/were action was not required. | lopted by the incorporators, or board of directors without shareholder ac | tion and shareholder |
| ■ The amendment(s) was/were as by the shareholders was/were: | lopted by the shareholders. The number of votes cast for the amendment sufficient for approval. | u(s) |
| ☐ The amendment(s) was/were apmust he separately provided for | proved by the shareholders through voting groups. The following states reach voting group entitled to vote separately on the amendment(s): | ment |
| "The number of votes cas | t for the amendment(s) was/were sufficient for approval | 2021 SEC TALL |
| by | (voting group) | FILI 2021 OCT 25 SECKETARY ALLAHASSEI |
| Dated | 10/11/2021 | |
| Signature | | 5: 42 STATE ORIDA |
| se le et | director, president or other officer – if directors or officers have not been ed, by an incorporator – if in the hands of a receiver, trustee, or other conted fiduciary by that fiduciary) | |
| | Edel Marro Martin | |
| | (Typed or printed name of person signing) | |
| | Owner | |
| | (Title of person signing) | <u> </u> |