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I ALBRITTON

COVER LETTER

TO: Amendment Section Division of Corporations

NAME OF CORPO	PRATION: CALI PENINSUL	A USA CORP	
DOCUMENT NUM	IBER: P21000095231		
The enclosed Article	s of Amendment and fee are su	abmitted for filing.	
Please return all corr	espondence concerning this ma	atter to the following:	
	Roy Ribot		
	~~~~	Name of Contact Person	n
	Ribot Business Solutions		
		Firm/ Company	
	28 W Flagler St Suite 1200D	•	
		Address	
	Miami, Fl, 33130		
		City/ State and Zip Cod	е
	roy@ribotsolutions.com		
		sed for future annual report	notification)
For further information	on concerning this matter, plea	se call: 786	906-0053
Name	of Contact Person		/ de & Daytime Telephone Number
Enclosed is a check f	or the following amount made		
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)
Am Div P.C	iling Address tendment Section rision of Corporations D. Box 6327 lahassee, FL 32314	Amend Divisio The Co 2415 N	Address ment Section n of Corporations entre of Tallahassee N. Monroe Street, Suite 810 ssee, FL 32303

## Articles of Amendment to Articles of Incorporation of

CALLPENINSULA USA CORP

CALI FENINSULA USA CORF		
	rently filed with the Florida Dept. of State)	
P21000095231		
(Document Number	per of Corporation (if known)	
Pursuant to the provisions of section 607.1006, Florida Statutes, t its Articles of Incorporation:	this Florida Profit Corporation adopts the following	amendment(s)
A. If amending name, enter the new name of the corporation	<u>ı:</u>	
		The new
name must be distinguishable and contain the word "corporation." Inc.," or Co.," or the designation "Corp." "Inc," or "Co". "chartered," "professional association," or the abbreviation "P.	". A professional corporation name must contain	
B. Enter new principal office address, if applicable: (Principal office address MUST BE A STREET ADDRESS)		<del></del>
		<b>19</b> 21
C. Enter new mailing address, if applicable:	· · · · · · · · · · · · · · · · · · ·	
(Mailing address <u>MAY BE A POST OFFICE BOX</u> )		
		<u> </u>
		لعصو.
	<del>-</del>	ū
D. If amending the registered agent and/or registered office a		
new registered agent and/or the new registered office addr	ress:	
Name of New Registered Agent		
(Florida	a street address)	
New Registered Office Address:	, Florida	
	(City) (Zip Co	de)
New Registered Agent's Signature, if changing Registered Age I hereby accept the appointment as registered agent. I am familia	<u>tent:</u> iar with and accept the obligations of the position.	
, ., ., ., ., ., ., ., ., ., ., ., ., .,		
Signature of Nev	w 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 Jo</u>	John Doe		
X Remove	<u>V</u> <u>M</u>	Mike Jones		
_X Add	SV S	Salty Smith		
Type of Action (Check One)	<u>Title</u>	Name	<u>Addres</u> s	
1) Change	Presiden	Ana Osorio	9900 N Kendall Dr apt K303	
X Add			Miami, Fl, 33176	
Remove				
2) Change	Presiden	CAMACHO PEREZ, HERMES A, S	312 E 6TH ST UNIT: 12	
Add			Hialeah, Fl, 33010	
X Remove 3) Change				
Add				
Remove				
4) Change				
Add				
Remove				
5) Change				
Add				
Remove				
6) Change				
Add				
Remove				

	eets, if necessary).	(Be specific)			
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			ion or cancellation	of issued shares.	
an amendment pro	ovides for an exch	<u>ange, reclassificat</u>	IIVII, VI CAIICCIIALIU		
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an amendment provisions for imple	ementing the amer	ange, reclassifica	tained in the amen	dment itself:	

	11/09/2021	
The date of each amendment		, if other than the
date this document was signed		
Effective date if applicable:	11/09/2021	
	(no more than 90 days after amendment file date)	<u></u>
Note: If the date inserted in the document's effective date on the	this block does not meet the applicable statutory filing requirements, this date will no he Department of State's records.	ot be listed as the
Adoption of Amendment(s)	( <u>CHECK ONE</u> )	
The amendment(s) was/wer action was not required.	re adopted by the incorporators, or board of directors without shareholder action and sh	areholder
☐ The amendment(s) was/wer by the shareholders was/we	re adopted by the shareholders. The number of votes east for the amendment(s) ere sufficient for approval.	
	re approved by the shareholders through voting groups. The following statement and for each voting group entitled to vote separately on the amendment(s):	
"The number of votes	cast for the amendment(s) was/were sufficient for approval	
by	v.	
,	(voting group)	
11/09/	2021	
DatedSignature		
sei	y a director, president or other officer - if directors or officers have not been lected, by an incorporator - if in the hands of a receiver, trustee, or other court pointed fiduciary by that fiduciary)	
	CAMACHO PEREZ, HERMES A. SR	
	(Typed or printed name of person signing)	
	President	
	(Title of person signing)	