P21000105163

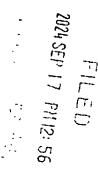
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COVER LETTER

TO: Amendment Section Division of Corporations

NAME OF CORP	ORATION: EDITORIAL PAC	INA AZUL CORP	
	MBER: P21000105163		
The enclosed Articl	es of Amendment and fee are st	ibmitted for filing.	
Please return all cor	respondence concerning this ma	atter to the following:	
	CATALINA, MARIA J.		
		Name of Contact Person	
	EDITORIAL PAGINA AZU	JL CORP	
		Firm/ Company	
	2051 NW 112 th AVE unit 1	• •	
		Address	
	Sweetwater, FL 33172		
	-	City/ State and Zip Cod	c
	catalinajimena@gmail.com		
	• ••	sed for future annual report	notification)
For further information of the Catalina, Mark	tion concerning this matter, plea		615 4902
	e of Contact Person	at (786) 515-4803
	for the following amount made		de & Daytime Telephone Number
imerosca is a circek	for the following amount made	payable to the Florida Dep.	arthem of State.
≡ \$35 Filing Fee	☐\$43.75 Filing Fee & Certificate of Status	□\$43.75 Filing Fee & Certified Copy (Additional copy is enclosed)	S52.50 Filing Fee Certificate of Status Certified Copy (Additional Copy is enclosed)
A D P.	mendment Section ivision of Corporations O. Box 6327 allahassee, FL 32314	Amend Divisio The Co 2415 N	Address Iment Section on of Corporations entre of Tallahassee N. Monroe Street, Suite 810 assee, FL 32303

Articles of Amendment to Articles of Incorporation οf

Check if applicable

 \Box The amendment(s) is/are being filed pursuant to s. 607.0120 (11) (e), F.S.

		to	
		Incorporation	To the second
		of	S. T.
EDITORIAL PAGINA AZUL CORP			
(<u>Name</u>	of Corporation as curre	ntly filed with the Florid	a Dept. of State)
P21000105163			T. C.
	(Document Number	r of Corporation (if knowr	1)
Pursuant to the provisions of section 607 its Articles of Incorporation:	.1006. Florida Statutes, th	is Florida Profit Corpora	etion adopts the following amendment(s) to
A. If amending name, enter the new n	ame of the corporation:		
			The new
name must be distinguishable and contain "Inc.," or Co.," or the designation "C "chartered," "professional association,"	Corp," "Inc," or "Co".	A professional corpora	atted" or the abbreviation "Corp.," tion name must contain the word
8. Enter new principal office address,			
(Principal office address <u>MUST BE A S</u>	TREET ADDRESS)	-	
C. Enter new mailing address, if appl (Mailing address <u>MAY BE A POST</u>			
			
D. If amending the registered agent ar	ed/on monte toward 11875 so and	blessoie Physids server	hamana gal
new registered agent and/or the new	<u>v registered office addre</u>	ess:	ae name of the
Name of New Registered Agent	CATALINA, MARIA	_	
<u> </u>	5790 NW 113 PL		
		street address)	
	DORAL, FL		33178
New Registered Office Address:		(City)	, Florida 33178 (Zip Code)
		((1))	τειρ συνές
New Registered Agent's Signature, if c	hanging Registered Ages	nt•	
hereby accept the appointment as regist			gations of the position.
	Maria June C	atabue	
	Signature of New	Registered Agent, if chan	ging

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	<u>V</u>	Mike Jones	
<u>X</u> Add	<u>sv</u>	Sally Smith	
Type of Action (Check One)	Title	<u>Name</u>	Address
1) Change	P	GOMEZ MARTINEZ, MARIA ELE	18441 NW 22ND ST
Add			PEMBROKE PINES, FL 33029
x Remove			
2) Change	VP	CATALINA, DEBORA R	7661 NW 107 AVE APT 806
Add			DORAL, FL 33178
X Remove 3) Change	Р	CATALINA, MARIA	5790 NW 113 PL
X Add			DORAL, FL 33178
Remove			
4) Change	VP	DE OLIVEIRA, CLAUDIO	5790 NW 113 PL
X Add			DORAL, FL 33178
Remove			
5) Change			
Add			
Remove			
6) Change			
Add			
Ramova			

E. If amending or adding additional Articles, enter change(s) here: (Attach additional sheets, if necessary). (Be specific)
Remove : GOMEZ MARTINEZ, MARIA ELENA (P)
Remove: CATALINA, DEBORA R (VP)
Add: CATALINA, MARIA J. (P)
Add: DE OLIVEIRA, CLAUDIO (VP)
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)

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The date of each amendment(s) at date this document was signed.	loption: if other than
Effective date if applicable: 07/2	4/2024
——————————————————————————————————————	(no more than 90 days after amendment file date)
Note: If the date inserted in this bl document's effective date on the De	ock does not meet the applicable statutory filing requirements, this date will not be listed as partment of State's records.
Adoption of Amendment(s)	(CHECK ONE)
■ The amendment(s) was/were ado action was not required.	nted by the incorporators, or board of directors without shareholder action and shareholder
☐ The amendment(s) was/were ado by the shareholders was/were su	oted by the shareholders. The number of votes cast for the amendment(s) ficient for approval.
must be separately provided for (roved by the shareholders through voting groups. The following statement each voting group entitled to vote separately on the amendment(s):
	or the amendment(s) was/were sufficient for approval
by	(voting group)
Dated 07/24/2024	
Signature	via Jimon Catolia
(By a dir selected	ector, president or other officer – if directors or officers have not been by an incorporator – if in the hands of a receiver, trustee, or other court d fiduciary by that fiduciary)
9	CATALINA, MARIA J.
-	(Typed or printed name of person signing)
I	President
_	(Title of person signing)