P22 000 006822

(Re	questor's Name)	
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PICK-UP	WAIT	MAIL
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(Do	cument Number)	
Certified Copies	_ Certificates	s of Status
Consideration to the		
Special Instructions to I	Hiling Officer:	
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Office Use Only



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SECRETARY OF STATE OF STORY OF ATTOMO

J DENNIS
DEC 0 7 2022

COVER LETTER

TO: Amendment Section Division of Corporations

NAME OF CORPOR	ATION:	RUKA USA CORP				
DOCUMENT NUMB	CUMENT NUMBER: P22000006812					
The enclosed Articles of	of Amendment and fee are su	bmitted for filing.				
Please return all corresp	oondence concerning this ma	itter to the following:				
		ARIADNA OJEDA				
-	Name of Contact Person					
	AYUDA CENTER					
-	Firm/ Company					
	8230 CORAL WAY					
-		Address				
		MIAMI, FL 33155				
-	City/ State and Zip Code					
	AO.	JEDA@AYUDACENTER.	.COM			
-		sed for future annual report				
	concerning this matter, plea		971-5232			
ARIADNA OJEDA Name of Contact Person		at ()971-5232 de & Daytime Telephone Number			
	the following amount made					
S35 Filing Fee	\$43.75 Filing Fee & Certificate of Status	S43.75 Filing Fee & Certified Copy (Additional copy is enclosed)	□\$52.50 Filing Fee Certificate of Status Certified Copy (Additional Copy is enclosed)			
Mailing Address Amendment Section Division of Corporations P.O. Box 6327		Street Address Amendment Section Division of Corporations The Centre of Tallahassee				
Tallahassee, FL 32314		2415 N. Monroe Street, Suite 810				

Tallahassee, FL 32303

Articles of Amendment to Articles of Incorporation of

RUKA USA CORP

(Name of Corporation	as currently filed with the l	Florida Dept. of State)
	P22000006812	
(Document)	nt Number of Corporation (if	known)
Pursuant to the provisions of section 607,1006, Florida S its Articles of Incorporation:	itatutes, this <i>Florida Profit Co</i>	orporation adopts the following amendment(s) to
A. If amending name, enter the new name of the corp	poration:	
		The new
name must be distinguishable and contain the word "corp "Inc.," or Co.," or the designation "Corp," "Inc." o "chartered," "professional association," or the abbrevio	or "Co". A professional co	corporated" or the abbreviation "Corp.," orporation name must contain the word
B. Enter new principal office address, if applicable:		
(Principal office address MUST BE A STREET ADDR	YESS)	
		<u> </u>
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)		
	-	
D. If amending the registered agent and/or registered		nter the name of the
new registered agent and/or the new registered of	<u>fice address:</u>	
Name of New Registered Agent		
	(Florida street address)	
New Registered Office Address:		. Florida
	(City)	(Zip Code)
New Registered Agent's Signature, if changing Regist I hereby accept the appointment as registered agent. La		ea abligations of the position
тистену иссерстве арронатель из тедыстей адет. Та	т затиш чин ини иссери н	e onigutions of the position.
Signatu	are of New Registered Agent,	if changing
·		

Check if applicable

 \square 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)

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>oe</u>	
X Remove	<u>V</u>	Mike Jo	<u>ones</u>	
X Add	<u>sv</u>	Sally Sr	nith	
Type of Action (Check One)	<u>Title</u>		<u>Name</u>	Address
1) Change	P		ALFREDO PIZARRO CARMONA	420 SW 7TH ST SUITE 1020
X Add				MIAMI, FL 33130
Remove				
2) X Change	D		FELIPE ELTON BULNES	420 SW 7TH ST SUITE 1020
Add				MIAMI, FL 33130
Remove Change				
Add				
Remove				
4) Change				
Add				
Remove				
5) Change				
Add				
Remove				
6) Change				
Add				
Remove				

Attach ac	ng or adding additional Articles, enter change(s) here: ditional sheets, if necessary). (Be specific)
	
lf an am	ndment provides for an exchange, reclassification, or cancellation of issued shares,
provisio	ns for implementing the amendment if not contained in the amendment itself:
(if n	ot applicable, indicate N/A)
	_

•

		1/18/2022	
The date of each amendment(s) ado	ption:	<u> </u>	, if other than the
date this document was signed.			
		1/18/2022	
Effective date <u>if applicable</u> :		10.7	
	(no more than 9	0 days after amendment file date)	
Note: If the date inserted in this blo document's effective date on the Department.		cable statutory filing requirements,	this date will not be listed as the
Adoption of Amendment(s)	(CHECK ONE)		
The amendment(s) was/were adopted action was not required.	ted by the incorporators, or l	board of directors without sharehol	der action and shareholder
☐ The amendment(s) was/were adop by the shareholders was/were suff	•	e number of votes east for the amer	ndment(s)
☐ The amendment(s) was/were appromust be separately provided for ed		ough voting groups. The following vote separately on the amendment(
"The number of votes cast fo	or the amendment(s) was/we	re sufficient for approval	
by		**	
	(voting group)		
Dated	3/16/2022		
Signature	Latt t		
selected,	•	cer – if directors or officers have no ic hands of a receiver, trustee, or off)	
	FEL	LIPE ELTON BULNES	
_	(Typed or printed	name of person signing)	_
	I	DIRECTOR	
_	(Title of person sig	gning)	