# P02000010295

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## **COVER LETTER**

TO: Amendment Section Division of Corporations

NAME OF COR	PORATION: MALAPARTE DE	GITAL INC	
	JMBER: P22000010295		
The enclosed Arti	cles of Amendment and fee are su	bmitted for filing.	
Please return all co	orrespondence concerning this ma	atter to the following:	
	FRANCESCO ARCIERI		
		Name of Contact Person	1
		Firm/ Company	
	33024 US HWY 19 NORTH		
		Address	
	PALM HARBOR, FL 34684		
		City/ State and Zip Cod	e
	FRANCESCO@AATAXPR		
	E-mail address: (to be u	sed for future annual report	notification)
For further inform	ation concerning this matter, plea	se call:	
FRANCESCO AI	RCHERI	727	, 669-1040
Na	me of Contact Person	Area Co	de & Daytime Telephone Number
Enclosed is a chec	k for the following amount made	payable to the Florida Depa	artment of State:
S35 Filing Fe	e ■\$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 Tallahassee, FL 32314	Amend Divisio The C	Address Iment Section on of Corporations entre of Tallahassee N. Monroe Street, Suite 810

Tallahassee, FL 32303

#### Articles of Amendment to Articles of Incorporation of



(Zip Code)

(Name of Corporation as currently filed with the Florida Dept. of State) P22000010295 (Document Number of Corporation (if known) Pursuant to the provisions of section 607.1006, Florida Statutes, this Florida Profit Corporation adopts the following amendment(s) to its Articles of Incorporation; A. If amending name, enter the new name of the corporation: MALAPARTE HOSPITALITY INC name must be distinguishable and contain the word "corporation," "company," or "incorporated" or the abbreviation "Corp.," "Inc.," or Co.," or the designation "Corp," "Inc," or "Co". A professional corporation name must contain the word "chartered," "professional association," or the abbreviation "P.A." B. Enter new principal office address, if applicable: (Principal office address MUST BE A STREET ADDRESS ) C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX) D. If amending the registered agent and/or registered office address in Florida, enter the name of the new registered agent and/or the new registered office address: Name of New Registered Agent (Florida street address) New Registered Office Address:

#### New Registered Agent's Signature, if changing Registered Agent:

I hereby accept the appointment as registered agent. I am familiar with and accept the obligations of the position.

Signature of New Registered Agent, if changing

#### Check if applicable

MALAPARTE DIGITAL INC

☐ The amendment(s) is/are being filed pursuant to s. 607.0120 (11) (c), 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.

Example:

X Change	<u>PT</u>	John Do	<u>oc</u>	
X Remove	<u>V</u>	Mike Jo	<u>ones</u>	
X Add	<u>SV</u>	Sally Si	mith	
Type of Action (Check One)	Title		Name	<u>Addres</u> s
1) Change		_		
Add				
Remove				
2) Change		_		
Add				
Remove 3 ) Change		_	-19-24	
Add				
Remove				
4) Change		_		
Add				
Remove				
5) Change				
Add				
Remove				
6) Change				
Add	- <del></del>		<del></del>	
Damaya				

Attach additional sheets, if necessary).	. (Be specific)
<del></del>	
	<u> </u>
6	and the second s
provisions for implementing the ame	change, reclassification, or cancellation of issued shares, sendment if not contained in the amendment itself:
(if not applicable, indicate N/A)	Charles of the Consulted in the internal control in the

	12/01/2023
The date of each amendment(	s) adoption:, if other than the
date this document was signed.	
	12/01/2023
Effective date <u>if applicable</u> :	(no more than 90 days after amendment file date)
	(no more than 70 days after amenament fite date)
	his 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)	( <u>CHECK ONE</u> )
The amendment(s) was/were action was not required.	adopted by the incorporators, or board of directors without shareholder action and shareholder
The amendment(s) was/were by the shareholders was/we	e adopted by the shareholders. The number of votes east for the amendment(s) re sufficient for approval.
	approved by the shareholders through voting groups. The following statement I 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	
	(voting group)
12/3/20	)23
Dated	
Signature	
	a director, president or other officer – if directors or officers have not been
	ected, by an incorporator – if in the hands of a receiver, trustee, or other court
ap	pointed fiduciary by that fiduciary)
	FRANCESCO ARCIERI
	(Typed or printed name of person signing)
	MANAGER
	(Title of person signing)

## COVER LETTER

TO: Amendment Section Division of Corporations

NAME OF CORPO	DRATION: MALAPARTE DI	GITAL INC	
DOCUMENT NUM	1BER: P22000010295		
The enclosed Article	es of Amendment and fee are su	ibmitted for filing.	
Please return all corr	espondence concerning this ma	atter to the following:	
	FRANCESCO ARCHERI		
		Name of Contact Perso	n
	33024 US HWY 19 NORTH	Firm/ Company	,
	PALM HARBOR, FL 34684	Address	
		City/ State and Zip Cod	c
	FRANCESCO@AATAXPR		
	E-mail address: (to be us	sed for future annual report	notification)
For further informati	on concerning this matter, plea	se call:	
FRANCESCO ARC	IERI	at ( <sup>727</sup>	669-1040
Namo	of Contact Person	Area Co	de & Daytime Telephone Number
Enclosed is a check (	or the following amount made	payable to the Florida Depa	artment of State:
S35 Filing Fee	\$43.75 Filing Fee & Certificate of Status	☐S43.75 Filing Fee & Certified Copy (Additional copy is enclosed)	☐S52.50 Filing Fee Certificate of Status Certified Copy (Additional Copy is enclosed)
An Di P.C	niling Address nendment Section vision of Corporations D. Box 6327 llahassee, 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

23( ) ; Articles of Incorporation of

MALAPARTE DIGITAL INC		
(Name of Corneration as succession		- / M2:09
(:vaine of Corporation as curre	ntly filed with the Florida De	pt. of State)
222000010295		
(Document Numbe	er of Corporation (if known)	
Pursuant to the provisions of section 607.1006, Florida Statutes, the Articles of Incorporation:	nis Floridu Profit Corporation	adopts the following amendmen
. If amending name, enter the new name of the corporation:		
ALAPARTE HOSPITALITY INC		
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	The new or the abbreviation "Corp.," name must contain the word
B. Enter new principal office address, if applicable: Principal office address MUST BE A STREET ADDRESS		
Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)		
). If amending the registered agent and/or registered office ac new registered agent and/or the new registered office addre	ddress in Florida, enter the n	ame of the
Name of New Registered Agent		
	street address)	<del> </del>
(Florida		
(Florida  New Registered Office Address:		, Florida

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)

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		
X Add	<u>sv</u>	Sally Smith		
Type of Action (Check One)	<u>Title</u>	<u>Na</u> r	ne	<u>Addres</u> s
1) Change		<u> </u>	<u> </u>	
Add				-
Remove				
2) Change				
Add				
Remove 3) Change				
Add				
Remove				
4) Change		_		
Add				
Remove				
5) Change		<u> </u>		
Add				
Remove				
6) Change				
Add			<del>-</del>	
Remove				·

	(Be specific)		
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	<u> </u>		
		<del></del>	<u> </u>
			<del></del>
<u>-</u>	<del></del> -		
	<del></del>		
***	<del></del>		
		•	
	·		
an amendment provides for an exch	nge, reclassification, or can	cellation of issued shares,	
rovisions for implementing the ame	nge, reclassification, or cand	cellation of issued shares, e amendment itself:	
an amendment provides for an exch rovisions for implementing the ame (if not applicable, indicate N/A)	nge, reclassification, or cand	cellation of issued shares, e amendment itself:	
rovisions for implementing the ame	nge, reclassification, or cand dment if not contained in th	cellation of issued shares, e amendment itself:	
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rovisions for implementing the ame	inge, reclassification, or cand	cellation of issued shares, e amendment itself:	
rovisions for implementing the ame	ange, reclassification, or cand	e amendment itself:	
	ange, reclassification, or cand	e amendment itself:	
rovisions for implementing the ame	dment if not contained in th	e amendment itself:	

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	12/01/2023	
The date of each amendment(s)	adoption:	, if other than the
date this document was signed.		
	01/2023	
Effective date <u>if applicable</u> :	(no more than 90 days after amendment fil	J. J. A.
	(no more than 90 days after amenament fu	e aate)
Note: If the date inserted in this document's effective date on the I	block does not meet the applicable statutory filing requi Department of State's records.	rements, this date will not be listed as the
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 sufficient for approval.	the amendment(s)
	proved by the shareholders through voting groups. The fire each voting group entitled to vote separately on the amo	
"The number of votes car	st for the amendment(s) was/were sufficient for approval	
by	n	
», <u> </u>	(voting group)	
12/3/2023 Dated		
Signature		
	director, president or other officer - if directors or officer	s have not been
	ed, by an incorporator - if in the hands of a receiver, trust	
appo	nted fiduciary by that fiduciary)	
	FRANCESCO ARCIERI	
	(Typed or printed name of person signing)	
	MANAGER	
	(Title of person signing)	·