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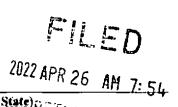
A. BUTLER
JUN 12 2022

## COVER LETTER

TO: Amendment Section
Division of Corporations

NAME OF CORPOR	RATION: INVESTMENT G	ALLEGO DIAZ, CORP			
DOCUMENT NUME					
The enclosed Articles	of Amendment and fee are su	bmitted for filing.			
Please return all corres	pondence concerning this ma	tter to the following:			
	MARCELO GALLEGOS				
	Name of Contact Person				
	Firm/ Company				
	6014 CRYSTAL VIEW DR				
	Address				
	ORLANDO FL 32819				
		City/ State and Zip Cod	c		
	E-mail address: (to be us	sed for future annual report	notification)		
For further information	concerning this matter, pleas	se call:			
MARCELO GALLEGOS		at ( <sup>786</sup>	867-2214		
Name of Contact Person		Area Co	de & Daytime Telephone Number		
Enclosed is a check for	the following amount made	payable to the Florida Depa	artment of State:		
\$35 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)		
Mailing Address Amendment Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314		Street Address Amendment Section Division of Corporations The Centre of Tallahassee 2415 N. Monroe Street, Suite 810 Tallahassee, FL 32303			

## Articles of Amendment to Articles of Incorporation of



INVESMENT GALLEGO DIAZ, COPR

(Name of Corporation	n as currently filed with the Flori	<del></del>
P22000019848		TALLAHASSE STATE
(Docume	ent Number of Corporation (if know	vn)
Pursuant to the provisions of section 607.1006, Florida sits Articles of Incorporation:	Statutes, this Florida Profit Corpor	ration adopts the following amendment(s) to
A. If amending name, enter the new name of the cor	poration:	
INVESTMENT GALLEGOS DIAZ, CORP		The new
name must be distinguishable and contain the word "cor "Inc.," or Co.," or the designation "Corp," "Inc," "chartered," "professional association," or the abbrev	or "Co". A professional corpor	
B. Enter new principal office address, if applicable: (Principal office address MUST BE A STREET ADD)	DLCC)	
Francipul office unuress <u>MOST BE A STREET ADDI</u>	<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 registere		the name of the
new registered agent and/or the new registered o	<u>Hice 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 Regis	itered Agent:	
I hereby accept the appointment as registered agent. 1	am familiar with and accept the ob	ligations of the position.
	ure of New Registered Agent, if che	inging

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</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>	Name	2	Address	
1) X Change	S	CAR	OLINA DIAZ	6014 CRYSTAL VIEW DR	
Add				ORLANDO FL 32819	
Remove					
2) Change			<del></del>		
Add					
Remove 3) Change					
Add					
Remove					
4) Change	•				
Add					
Remove					
5) Change				<del></del>	
Add					
Remove					
6) Change					
Add					
Remove					

	(Be specific)
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an amendment provides for an exc	hange reclassification or cancellation of issued shares
provisions for implementing the ame	hange, reclassification, or cancellation of issued shares, endment if not contained in the amendment itself:
an amendment provides for an exc provisions for implementing the ame (if not applicable, indicate N/A)	hange, reclassification, or cancellation of issued shares, endment if not contained in the amendment itself:
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provisions for implementing the amo	hange, reclassification, or cancellation of issued shares, endment if not contained in the amendment itself:

..

The date of each amendment(s) ad	option:	4	/21/2022		, if other than the
late this document was signed.			101/2022.		,
Effective date <u>if applicable</u> :		5,	101/2022.	<del></del>	
	(no n	nore thai	n 90 days after amendm	ent file date)	
Note: If the date inserted in this bl document's effective date on the De				requirements, this	date will not be listed as the
Adoption of Amendment(s)	(CHECK	ONE)			
The amendment(s) was/were adoption was not required.	pted by the incorp	orators,	or board of directors wi	thout shareholder ac	tion and shareholder
☐ The amendment(s) was/were ado by the shareholders was/were su			The number of votes ca	st for the amendmen	it(s)
☐ The amendment(s) was/were app must be separately provided for					nent
"The number of votes cast i	for the amendmen	t(s) was/	were sufficient for appr	oval	
by	<u>-</u>			·"	
	(voting gro	oup)			
Dated		A			
Signature					
(By a dir	rector, president o	r other o	officer – if directors or o Athe hands of a receiver	fficers have not been	1
	ed fiduciary by the			, trustee, or other co	uit
	Mari	ch	Gallego 5		
-				ng)	
		Pres	ident.		
•	(Title o	of person	signing)		<del></del>