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2023 HAR -4 PM 7: 57 SECRETARY OF STATE

COVER LETTER

TO: Amendment Section Division of Corporations

NAME OF CORPO	DRATION: LUE DIAZ ARTI	STRY	
	IBER: P22000031582		
	s of Amendment and fee are s		
Please return all corr	espondence concerning this m	atter to the following:	
	Luis E Diaz Velez		
		Name of Contact Perso	n
	LUE DIAZ ARTISTRY	rume or confact reiso	и
		Firm/ Company	
	14316 QUEENSIDE st	• •	
		Address	**
	Orlando Fl 32824		
		City/ State and Zip Cod	e
	Luediazart@gmail.com		
	E-mail address: (to be u	sed for future annual report	notification)
For further information	on concerning this matter, plea	se call:	
Luis E Diaz		407	de & Daytime Telephone Number
Name of Contact Person		Area Co	de & Daytime Telephone Number
Enclosed is a check fo	or the following amount made		
S35 Filing Fee	S43.75 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)
Mai	iling Address	Strant	t dalam.

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

(Name of Corpor LUE DIAZ ARTISTRY LLC	ation as currently filed with the Flor	ida Dept. of State)
(Doc	rument Number of Corporation (if know	wn)
Pursuant to the provisions of section 607.1006, Flor its Articles of Incorporation:	rida Statutes, this <i>Florida Profit Corpo</i>	ration adopts the following amendment(s) to
A. If amending name, enter the new name of the	corporation:	
LUE DIAZ ARTISTRY Inc		
name must be distinguishable and contain the word " "Inc.," or Co.," or the designation "Corp," "In "chartered," "professional association," or the abl	C OF CO d mentageing d	The new orated" or the abbreviation "Corp" ration name must contain the word
B. <u>Enter new principal office address, if applicat</u> (Principal office address <u>MUST BE A STREET Al</u>	ole: DDRESS)	
C. Enter new mailing address, if applicable: (Mailing address <u>MAY BE A POST OFFICE B</u>	<u> </u>	
D. If amending the registered agent and/or regist new registered agent and/or the new registered Name of New Registered Agent	ered office address in Florida, enter d office address:	
	47 1	
	(Florida street address)	
New Registered Office Address:	(City)	. Florida(Zip Code)
lew Registered Agent's Signature, if changing Re hereby accept the appointment as registered agent.	gistered Agent: I am familiar with and accept the obl	igations of the position.
Sign	nature of New Registered Agent, if char	SF 7023
heck if applicable The amendment(s) is/are being filed pursuant to s.	607.0120 (11) (e), F.S.	2023 HAR -4 PH SECRETARY OF TALLAHASSE

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 = ChiefExecutive 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>	<u>Addres</u> s
1) Change	 -		
Add			
Remove			
2) Change	-		
Add			
Remove			
3) Change			
Add			
Remove			
4) Change			
Add			
Remove			
5) Change			
Add			
Remove			
6) Change	-		
Add			
Remove			7.C 23
			RITARY LEAHAS
			ASSEANCE PLANT
			SECRITARY OF STATE TALLAHASSEE, FL
			: 57

	(Be specific)	
		
		
	- · · · ·	
f an amendment provides for an exchaprovisions for implementing the amen (if not applicable, indicate N/A)	nge, reclassification, or cancellation of issued shares, dment if not contained in the amendment itself:	
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22 0 2 1 2 101 implementing the amen	nge, reclassification, or cancellation of issued shares, dment if not contained in the amendment itself:	
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04/03/2023
The date of each amendment(s) adoption: date this document was signed. . if other than the
04/03/2023
Effective date if applicable:
(no more than 90 days after amendment file date)
Note: If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as the document's effective date on the Department of State's records.
Adoption of Amendment(s) (CHECK ONE)
The amendment(s) was/were adopted by the incorporators, or board of directors without shareholder action and shareholder action was not required.
☐ The amendment(s) was/were adopted by the shareholders. The number of votes east for the amendment(s) by the shareholders was/were sufficient for approval.
☐ The amendment(s) was/were approved by the shareholders through voting groups. The following statement must be separately provided 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)
04/03/2023
Dated
Signature 40 1
(By a director, president or other officer – if directors or officers have not been selected, by an incorporator – if in the hands of a receiver, trustee, or other court
appointed fiduciary by that fiduciary)
Luis Enrique Diaz Velez
(Typed or printed name of person signing)
CEO
(Title of person signing)

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SECRETARY OF STATE
TALLAHASSEE, FL