P2200003277

| (Re | equestor's Name) | |
|-------------------------|-------------------|-------------|
| (Ad | ldress) | |
| (Ad | idress) | |
| (Cit | ty/State/Zip/Phon | e #) |
| PICK-UP | <u></u> | MAIL |
| (Bu | siness Entity Nar | me) |
| · | - | · |
| (Do | cument Number) | |
| Certified Copies | _ Certificates | s of Status |
| Special Instructions to | Filing Officer: | |
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Office Use Only



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A. RAMSEY FEB _ 9 2023

COVER LETTER

TO: Amendment Section Division of Corporations

| NAME OF CORPO | RATION: EDISA SERVICES | S. INC. | | |
|--|---|--|--|--|
| DOCUMENT NUM | BER: P22000032772 | <u> </u> | | |
| | of Amendment and fee are su | bmitted for filing. | | |
| Please return all corre | spondence concerning this ma | tter to the following: | | |
| | ANTONIO R CRACCHIOLO | 0 | | |
| | EDISA SERVICES, INC. | Name of Contact Perso | n | |
| | - I.DIGN GERVICE. | Firm/ Company | | |
| | 15279 SW 89TH TERRACE | _ | | |
| | | Address | | |
| | MIAMI, FL 33196 | | | |
| | | City/ State and Zip Cod | e | |
| | MISLEIDY,PIMENTEL0010 | @GMAIL.COM | | |
| | E-mail address: (to be us | sed for future annual report | notification) | |
| For further information | on concerning this matter, plea | se call: | | |
| ANTONIO R CRAC | CHIOLO | at (| 872-2787 | |
| Name | of Contact Person | Area Code & Daytime Telephone Number | | |
| Enclosed is a check f | or the following amount made | payable to the Florida Dep | partment of State: | |
| \$35 Filing Fee | S43.75 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

FILEU

Articles of Amendment to Articles of Incorporation of

2022 NOV 14 PM 12 25

| EDISA SERVICES, INC. | |
|---|---|
| (Name of Corporation as current | ly filed with the Florida Dept. of State) |
| P22000032772 | |
| (Document Number of | of Corporation (if known) |
| Pursuant to the provisions of section 607.1006, Florida Statutes, this articles of Incorporation: | Florida Profit Corporation adopts the following amendme |
| A. If amending name, enter the new name of the corporation: | |
| N/A | The new |
| 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. | A professional corporation name must contain the word |
| | N/A |
| B. Enter new principal office address, if applicable: (Principal office address MUST BE A STREET ADDRESS) | |
| | |
| | |
| O D | |
| C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX) | N/A |
| | |
| | |
| | |
| D. If amending the registered agent and/or registered office ad- | dress in Florida, enter the name of the |
| new registered agent and/or the new registered office address | <u>ss:</u> |
| Name of New Registered Agent N/A | |
| | |
| (Florida s | treet address) |
| | Florida |
| New Registered Office Address: | (City) (Zip Code) |
| | (City) (Zip Code) |
| 2 C | |
| New Registered Agent's Signature, if changing Registered Agen I hereby accept the appointment as registered agent. I am familian | with and accept the obligations of the position. |
| No. 1 | |
| | |
| | |
| Signature of New | Registered Agent, if changing |

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 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 = Contract CEO = CoExecutive Officer; CFO = Chief Financial Officer. If an officer/director holds more than one title, list the first letter of each office 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. The a change, Mike Jones leaves the corporation, Sally Smith is named the V and S. These should be noted as John Doc, PT as a Chi 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 | | |
| X Add | <u>\$V</u> | <u>Şally Sr</u> | | |
| Type of Action (Check One) | <u>Title</u> | | Name | Address |
| 1) Change | V | _ | DANIEL CRACCHIOLO | 15279 SW 89TH TERRACE |
| Add | | | | MIAM1. FL 33196 |
| X Remove | | | | |
| 2) Change | | | | |
| Add | | | | |
| Remove Change | | _ | | |
| Add | | | | |
| Remove | | | | |
| 4) Change | | | | |
| Add | | | | |
| Remove | | | | |
| 51 Change | | | | |
| Add | | | | |
| Remove | | | | |
| 6) Change | | | | |
| Add | | | | |
| Remove | | | | |

| Attach additiona | adding additional A il sheets, if necessary |). (Be specific) | | | | |
|------------------|--|-------------------|------------------|---------------------------------------|---------------------------------------|-------------|
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| IC amandma | nt provides for an e | vehanoe reclassif | lication, or can | cellation of issue | d shares. | |
| orovisions for | implementing the a | mendment if not | contained in th | e amendment it | self: | |
| (if not app | licable, indicate N/A | , | | | | |
| /A | | | | | | |
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| 08/10/2022 |
|--|
| The date of each amendment(s) adoption:, if other that date this document was signed. |
| 08/10/2022 |
| Effective date if applicable: (no more than 90 days after amendment file date) |
| Note: If the date inscreed in this block does not meet the applicable statutory filing requirements, this date will not be listed a 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 cast 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 east for the amendment() was were sufficient for approval |
| - by ANTONIO R. CRACCHIOLO My foni o racclulo. |
| (voting gloup) |
| 08/10/2022 |
| Signature: Intonio Craccho |
| (BL a director, president or other officer - if directors or officers have not been |
| selected, by an incorporator - it in the hands of a receiver, trustee, or other court |
| appointed fiduciary by that fiduciary) |
| ANTONIO R CRACCHIOLO |
| (Typed or printed name of person signing) |
| PRESIDENT |
| (Title of person signing) |