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COVER LETTER

TO: Amendment Section Division of Corporations

Tallahassee, FL 32314

NAME OF CORPO	RATION: GIRAUP CORP			
DOCUMENT NUM	BER: P22000039235		_300	
	s of Amendment and fee are su	bmitted for filing.		
Please return all corr	espondence concerning this ma	tter to the following:		
	HAYLEN N, CORDANDI P	ARTIDAS		
		Name of Contact Perso	n	
		Firm/ Company		
	8350 NW 52ND TERRACE	SUITE 301		
		Address		
	MIAMI, FL 33166		_	
		City/ State and Zip Cod	e	
	HSERVICESWORLD@GM.	AIL.COM		
	E-mail address: (to be us	sed for future annual report	notification)	
For further information	on concerning this matter, pleas	se call:		
HAYLEN N, CORD	ANDI PARTIDAS	at (de & Daytime Telephone Number	
Name of Contact Person		Area Co	de & Daytime Telephone Number	
Enclosed is a check f	or the following amount made	payable to the Florida Dep	artment of State:	
S35 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		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

FII ED

GIRAUP CORP		2022 JUN 23 I <mark>orida Dept. of State)</mark> SECRETARY TALLAHASSE	-PM 12-20
(Name of Corporation	as currently filed with the F	orida Dept. of State)	
P22000039235		TALLAHASSE	Uh., 1 E., 11
(Docume)	nt Number of Corporation (if k	nown)	
Pursuant to the provisions of section 607.1006, Florida S its Articles of Incorporation:	Statutes, this <i>Florida Profit Cor</i>	poration adopts the following am	endment(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," of "chartered," "professional association," or the abbrevia	or "Co". A professional cor	orporated" or the abbreviation "C poration name must contain the	orp.," word
B. Enter new principal office address, if applicable:		<u></u>	
(Principal office address MUST BE A STREET ADDR	<u>RESS</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	d office address in Florida, en	ter the name of the	
new registered agent and/or the new registered of	fice address:		
Name of New Registered Agent			
-			
	(Florida street address)		
New Registered Office Address:		, Florida	
New Registered Office Address.	(City)	(Zip Code)	
New Registered Agent's Signature, if changing Regist		abligations of the musicion	
Thereby accept the appointment as registered agent. To	ат jamihar wan ana ассерт те	oonganons of the position.	

Signature of New Registered Agent, if changing

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>	<u>Sally Smith</u>		
Type of Action (Check One)	<u>Title</u>	<u>Name</u>	<u>Addres</u> s	
1) Change	V	VITMAR A, GORRIN AZUAJE	8350 NW 52ND TERRACE	
X Add			SUITE 301	
			MIAMI, FL 33166	
Remove				
2) Change				
Add				
Remove 3) Change				
Add				
Remove				
4) Change				
Add				
Remove				
5) Change				
Add				
Remove				
6) Change				
Add				
Remove				

	ing additional Art eets, if necessary).	(Be specific)				
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The date of each amendment(s) adoption:
date this document was signed. 06/07/2022
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 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(s) was/were sufficient for approval
by HAYLEN N. CORDANDI PARTIDAS " (voting group)
(voting group)
06/07/2022 Dated
Signature Hayling Corogner Paris 28 (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)
HAYLEN N. CORDANDI PARTIDAS
(Typed or printed name of person signing)
PRESIDENT