P22000058974

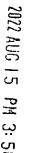
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(Business	Entity Name)	
(Documen	t Number)	·
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Special Instructions to Filing C	ऑficer:	

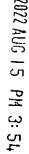
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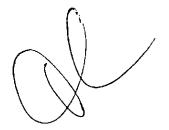


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COVER LETTER

TO: Amendment Section Division of Corporations

NAME OF CORPO	ORATION: MCI Software Cor	р		
DOCUMENT NUN	1BER: P22000058979			
The enclosed Article	es of Amendment and fee are su	bmitted for filing.		
Please return all corr	respondence concerning this ma	tter to the following:		
	Ignacio Araujo			
		Name of Contact Perso	n	
	MCI Software Corp			
		Firm/ Company		
	4100 Corporate Square, Suite	: 159		
	 	Address		
	Naples, Florida. 34104			207
		City/ State and Zip Cod	le	2022 AUG
	info@mcisoftware.net			<u> </u>
	E-mail address: (to be us	sed for future annual report	t notification)	. О
				<u> </u>
For further informat	ion concerning this matter, plea	se call:		3: 54
Ignacio Araujo		at (²³⁹	8789666	£
Namo	e of Contact Person	Area Co	de & Daytime Telephone Nur	nber
Enclosed is a check	for the following amount made	payable to the Florida Dep	artment of State:	
■ \$35 Filing Fee	\$43.75 Filing Fee & Certificate of Status	☐\$43.75 Filing Fee & Certified Copy (Additional copy is enclosed)	\$52.50 Filing Fee Certificate of Status Certified Copy (Additional Copy is enclosed)	
At Di P.	nendment Section vision of Corporations O. Box 6327 Illahassee, FL 32314	Amend Division The C	Address dment Section on of Corporations entre of Tallahassee N. Monroe Street, Suite 810)

Tallahassee, FL 32303

Articles of Amendment to Articles of Incorporation of

(Name of Corporation as currently filed with the Florida Dept. of State) P22000058979 (Document Number of Corporation (if known) Pursuant to the provisions of section 607.1006, Florida Statutes, this Florida Profit Corporation adopts the following am its Articles of Incorporation: A. If amending name, enter the new name of the corporation: N/A The name must be distinguishable and contain the word "corporation," "company," or "incorporated" or the abbreviation "C"Inc." or Co.," or the designation "Corp," "Inc." or "Co". A professional corporation name must contain the "chartered," "professional association," or the abbreviation "P.A." B. Enter new principal office address, if applicable: (Principal office address MUST BE A STREET ADDRESS) Naples, Florida 34104 C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX) N/A - Same as above. N/A - Same as above. 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: N/A N/A (Florida street address) N/A (Florida street address) N/A (City) (City) (Top Code)	
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N/A (Florida street address) New Registered Office Address: N/A New Registered Office Address:	
New Registered Office Address: N/A , Florida, Florida,	
New Registered Office Address:, Florida, Florida	
	<u>.</u>
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

☐ 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> <u>John</u>	1 Doe		
X Remove	<u>V</u> <u>Mik</u>	e Jones		
X Add	SV Sall	y Smith		
Type of Action (Check One)	<u>Title</u>	Name	<u>Addres</u> s	
1) Change	V	Maria Gabriela Gil	4100 Corporate Square, Suite 159	
X Add			Naples, Florida 34104	
Remove				
2) Change				-
Add			2077	<u>.</u>
Remove 3) Change				
Add			5	3
Remove			<u> </u>	
4) Change			5 t	
Add				
Remove				
5) Change				
Add				
Remove				
6) Change				
Add				,
Demove				

(Attach additional sheets, if necessary). (Be specific)	
A	
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	· · · · · · · · · · · · · · · · · · ·
f an amendment provides for an exchange, reclassification, or	cancellation of issued shares.
provisions for implementing the amendment if not contained	in the amendment itself:
(if not applicable, indicate N/A)	
	2)
	·· - .
	, <u>P</u>

•	08/12/2022		
The date of each amendment(s) add			, if other than the
date this document was signed. N/A			
Effective date <u>if applicable</u> :			
	(no more than 90 c	days after amendment file date)	
Note: If the date inserted in this blo document's effective date on the Dep		ble statutory filing requirements, this	date will not be listed as the
Adoption of Amendment(s)	(CHECK ONE)		
The amendment(s) was/were adopaction was not required.	ted by the incorporators, or bo	ard of directors without shareholder ac	ction and shareholder
☐ The amendment(s) was/were adop by the shareholders was/were suf		number of votes cast for the amendmer	nt(s)
		igh voting groups. The following state of separately on the amendment(s):	ment
"The number of votes cast for	or the amendment(s) was/were	sufficient for approval	
by		79	
<u>-</u>	(voting group)		
08/12/2022 Dated		_	
Dated			
Signature /	/	\mathcal{L}	
	ector, president or other officer	r - if directors or officers have not bee	n
selected,	by an incorporator - if in the	hands of a receiver, trustee, or other co	ourt
appointe	d fiduciary by that fiduciary)	-	
l	gnacio Araujo		
-	(Typed or printed na	ime of person signing)	······································
P	resident	,	
-	(Title of person sign	ing)	

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