Note: Please print this page and use it as a cover sheet. Type the fax audit number (shown below) on the top and bottom of all pages of the document.

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To:

Division of Corporations

Fax Number : (850)617-6380

From:

Account Name : ANDING CONSULTING GROUP INC

Account Number : I29220000013 Phone : (407)376-2911 Fax Number : (407)674-2255

Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please.

Email Address: dario@andinocg.com

COR AMND/RESTATE/CORRECT OR O/D RESIGN FELIPE ORTIZ P.A.

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COVER LETTER

TO: Amendment Sect Division of Corpo					
	RATION: FELIPE ORTIZ P.A				
NAME OF CORPO					
DOCUMENT NUM	BER: P22000069224				
The enclosed Articles	of Amendment and fee are sub	mitted for filing.			
Please return all corre	spondence concerning this matt	er to the following:			
	DARIO ALVAREZ				
		Name of Contact Person			
	ANDINO CONSULTING GR	OUP INC			
		Firm/ Company			
	8421 S ORANGE BLOSSOM				202
		Address			20
	ORLANDO, FL 32809	71001113		-	2022 OCT 20
	OKEANOO, 15 Jaco	City/ State and Zip Code			20
		City/ State and Zip Code	i		
	INFO@ANDINOCG.COM			ξ,	AH
•	E-mail address: (to be us	ed for future annual report	notification)	•	8: 40
				` <u>}</u> .	Ţ.
For further informati	on concerning this matter, pleas	e call:			_
DARIO ALVAREZ		at (407	376-2911		
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	S43.75 Filing Fee & Certificate of Status	□\$43.75 Filing Fee & Certified Copy (Additional copy is enclosed)	S52.50 Filing Fee Certificate of Status Certified Copy (Additional Copy is enclosed)		
	ailing Address mendment Section		Address iment Section		
	menument Section ivision of Corporations	-	on of Corporations		
	O. Box 6327		entre of Tallahassee		
Ti	allahassee, FL 32314		N. Monroe Street, Suite 810 assee, FL 32303		

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Articles of Amendment to Articles of Incorporation of

Alex (Classical and Alex District Control of the Co	
tly filed with the Florida Dent, o	of State)
<u></u>	
of Corporation (if known)	
s Florida Profit Corporation adoq	pts the following amendment(s) to
	The new
"company," or "incorporated" or A professional corporation nam ."	the abbreviation "Corp.,"
N/A	20
N/A	022 OCT
N/A	CT 2
N/A	0 Se
N/A	: 'C
N/A	- 0 - t
ldress in Florida, enter the name 55:	of the
	
•	N/A
(Clay)	Florida N/A (Zip Code)
, ,,	1-4
	,
Registered Agent, if changing	
	"company," or "incorporated" of A professional corporation nam." N/A N/A N/A N/A N/A N/A N/A N/

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 = 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 Mika 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.

Exemple:

Example: X.Change	PT	John Doe		
X Remove	⊻	Mike Jones		
_X Add	<u>\$Y</u>	Sally Smith		
Type of Action (Check One)	_Title	Name	Address	
1) N/A Change	N/A	N/A	N/A	
N/A Add			N/A	2027
N/A Remove			N/A	2022 OCT
2) N/A Change	N/A	N/A	N/A	D.)
N/A Add			N/A SS	4
N/A Remove 3) N/A Change	N/A	N/A	N/A nn-	œ, 🕻
N/A Add	_		N/A	
N/A Remove			N/A	
4) N/A Change	N/A	N/A	N/A	
N/A Add		***	N/A	
N/A Remove			N/A	
5) N/A Change	N/A	N/A	N/A	
N/A Add			N/A	
N/A Remove			N/A	
6) N/A Change	N/A	N/A	N/A	
N/A Add			N/A	
N/A Remove			N/A	-

L If amending or adding additional Articles, enter change(s) here: (Attach additional sheets, if necessary). (Be specific)		
N/A		
N/A		
N/A		
N/A		~
N/A		2022 OCT
N/A	-	0CT
F. If an amendment provides for an exchange, reclassification, or cancellation of issued shares, providing for implementing the amendment if not contained in the amendment itself; (if not applicable, indicate N/A)	5.05 	20 AH 8:40
N/A		0
N/A	<u> </u>	
N/A		

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The date of each amendment(s) date this document was signed.	adoptica:	, if other than the
Effective date <u>if applicable</u> :	(no more than 90 days after amendment file date)	
	(no more vian 90 aays after amenament fue oate)	
Note: If the date inserted in this locument's effective date on the	block does not meet the applicable statutory filing requirements, this date will Department of State's records.	not be listed as the
Adoption of Amendment(s)	(CHECK ONE)	
The amendment(s) was/were a action was not required.	idopted by the incorporators, or board of directors without shareholder action and	shareholder
The amendment(s) was/were a by the shareholders was/were	adopted by the shareholders. The number of votes cast for the amendment(s) sufficient for approval.	
	upproved by the shareholders through voting groups. The following statement for each voting group entitled to vote separately on the amendment(s):	
"The number of votes ca	ast for the amendment(s) was/were sufficient for approval	
ъу	, , , , , , , , , , , , , , , , , , , ,	
	(voting group)	2022 OCT
		·)C
Dated		
		20
Signature		<u>-∰: ≥ 1</u> 1
selo	a director, president or other officer – if directors or officers have not been cted, by an incorporator – if in the hands of a receiver, trustee, or other court pinted fiduciary by that fiduciary)	80
	FELIPE ORTIZ GARCIA	
	(Typed or printed name of person signing)	
	PRES	
	(Title of nesson tiestan)	