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TO: Amendment Section Division of Corporations

Tallahassee, FL 32314

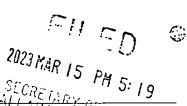
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NAME OF CORPOR	ATION: ARF & HRN COR	P	
DOCUMENT NUMB			
	of Amendment and fee are su	bmitted for filing.	
Please return all corresp	pondence concerning this ma	tter to the following:	
	ANIBAL ROSADO		
-		Name of Contact Persor	1
-		Firm/ Company	
	11954 NARCOOSSEE RD S	TE 330	
		Address	
	ORLANDO FL 32832		
- -		City/ State and Zip Code	
	ANIBAL.ROSADO@ARFP.	R.COM	
-	E-mail address: (to be us	sed for future annual report	notification)
For further information	concerning this matter, pleas	se call:	
ANIBAL ROSADO		787 at (6403386
Name o	f Contact Person		de & Daytime Telephone Number
Enclosed is a check for	the following amount made	payable to the Florida Depa	artment of State:
S35 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)
Ame Divis	ing Address ndment Section sion of Corporations Box 6327	Amend Divisio	Address Iment Section on of Corporations entre of Tallahassee

2415 N. Monroe Street, Suite 810

Tallahassee, FL 32303

Articles of Amendment to Articles of Incorporation of



ARF & HRN CORP

(Name of Corporation as currently filed with the Florida Dept. of P22000083268 (Document Number of Corporation (if known) Pursuant to the provisions of section 607.1006. Florida Statutes, this Florida Profit Corporation adopts the following amendment(s) to its Articles of Incorporation: A. If amending name, enter the new name of the corporation: ADG CARIBE CORP name must be distinguishable and contain the word "corporation," "company," or "incorporated" or the abbreviation "Corp.," "Inc.," or Co.," or the designation "Corp," "Inc.," or "Co". A professional corporation name must contain the word "chartered," "professional association," or the abbreviation "P.A." N/A B. Enter new principal office address, if applicable: (Principal office address MUST BE A STREET ADDRESS) C. Enter new mailing address, if applicable: N/A (Muiling address MAY BE A POST OFFICE BOX) 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: Name of New Registered Agent (Florida street address) New Registered Office Address: (Cin) (Zip Code) New Registered Agent's Signature, if changing Registered Agent: I hereby accept the appointment as registered agent. A 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)

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.

Example: X Change	<u>PT</u>	John Doe	
X Remove	<u>V</u>	Mike Jones	
X Add	<u>SV</u>	Sally Smith	
Type of Action (Check One)	<u>Title</u>	<u>Name</u>	Address
1) Change		<u> </u>	
Add			
Remove			
2) Change			
Add			
Remove 3) Change			
Add			
Remove			
4) Change			
Add			
Remove			
5) Change			
Add			
Remove			
6) Change			
Add			
Pamaya			

(Attach ac	<mark>ling or adding ad</mark> dditional sheets, if	ditional Article; 'necessary). ((s, enter change Be specific)	(s) here:			
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					7.11-	12.2	
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			· 				
If an am	endment provide	s for an exchan	ge reclassifica	tion or cancella	ition of issued sh	ares.	
provisio	ons for implemen	ting the amend	ment if not con	tained in the an	nendment itself:		
(if n	not applicable, ind	licate N/A)		-			
/A							
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	03/01/2023	
The date of each amendment(s) adoption:	, if other than the
late this document was signed.		
	3/01/2023	
Effective date <u>if applicable</u> :		
	(no more than 90 days after amendment file date	۲)
Note: If the date inserted in thi document's effective date on the	s block does not meet the applicable statutory filing requirement. Department of State's records.	nts, this date will not be listed as th
Adoption of Amendment(s)	(<u>CHECK ONE</u>)	
☐ The amendment(s) was/were action was not required.	adopted by the incorporators, or board of directors without share	holder action and shareholder
■ The amendment(s) was/were by the shareholders was/were	adopted by the shareholders. The number of votes east for the are sufficient for approval.	mendment(s)
	approved by the shareholders through voting groups. The follow for each voting group entitled to vote separately on the amendment	
"The number of votes of	ast for the amendment(s) was/were sufficient for approval	
by		
<u> </u>	(voting group)	
03/01/2 Dated Signature	a director, president or other officer – if directors or officers have	e not been
sele	cted, by an incorporator – if in the hands of a receiver, trustee, of ointed fiduciary by that fiduciary)	
	ANIBAL ROSADO	
	(Typed or printed name of person signing)	
	REGISTERED AGENT/VP	
	(Title of person signing)	