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Division of Corporations

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From:

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Account Number : I20190000111 Phone : (407)800-7028 Fax Number : (407)992-9407

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## COR AMND/RESTATE/CORRECT OR O/D RESIGN KAIKEN CAPITAL CORP

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## **COVER LETTER**

TO: Amendment Section Division of Corporations KAIKEN CAPITAL CORP NAME OF CORPORATION: DOCUMENT NUMBER: The enclosed Articles of Amendment and fee are submitted for filing. Please return all correspondence concerning this matter to the following: Maria C Sousa Name of Contact Person SA Finance & Accounting Inc Firm/ Company 5728 Major Blvd Ste 309 Address Orlando Florida 32819 City/ State and Zip Code Licenses@safinacc.com E-mail address: (to be used for future annual report notification) For further information concerning this matter, please call: Maria C Sousa Name of Contact Person Area Code & Daytime Telephone Number Enclosed is a check for the following amount made payable to the Florida Department of State: ☐ \$35 Filing Fee ☐\$43.75 Filing Fee & □\$43.75 Filing Fee & □\$52.50 Filing Fee Certificate of Status Certified Copy Certificate of Status (Additional copy is Certified Copy enclosed) (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

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Articles of Amendment to Articles of Incorporation of

KAIKEN CAPITAL CORP			
	of Corporation as curren	tly filed with the Florida Dept. of State)	
P22000086681			
	(Document Number	of Corporation (if known)	
Pursuant to the provisions of section 607 its Articles of Incorporation:	.1006, Florida Statutes, thi	s Florida Profit Corporation adopts the following amendme	nt(s) ti
A. If amending name, enter the new n	ame of the corporation:		
name must be distinguishable and contain	the word "corporation,"	The new "company," or "incorporated" or the abbreviation "Corp"	
"Inc.," or Co.," or the designation "("chartered," "professional association,	Corp," "Inc," or "Co",	A professional corporation name must contain the cord	. يستناسي
B. Enter new principal office address,		5728 MAJOR BLVD STE 309	in section of the sec
(Principal office address <u>MUST BE A S</u>	TREET ADDRESS )	ORLANDO, FL 32819	j. "
			i T
			. •
C. Enter new mailing address, if appl		5728 MAJOR BLVD STE 309	- 
(Mailing address <u>MAY BE A POST</u>	OFFICE BOX	ORLANDO, FL 32819	
D. If amending the registered agent ar	nd/or registered office add	dress in Florida, enter the name of the	
new registered agent and/or the ne			
Name of New Registered Agent	SA FINANCE & ACCO	UNTING INC	
	5728 MAJOR BLVD ST	E 309	
	(Florida s	treet address)	
New Registered Office Address:	ORLANDO	. Florida 32819	
		(City) (Zip Code)	
New Registered Agent's Signature, if c I hereby accept the appointment as regist	hunging Registered Agen ered agent. I am familiar	t: with and accept the obligations of the position.	
. , , , , , , , , , , , , , , , , , , ,	<b>3</b>	,	
	<u>.</u>		
<del></del>	<u> </u>	ed to the second se	
	Signature of New 1	Registered Agent, if changing	
Chack if applicable			

## Check if applicable

The amendment(s) is/are being filed pursuant to s. 607.0120 (11) (e), F.S.

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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 = Trustec; 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 Doc	
-			
X Remove	<u>Y</u>	Mike Jones	
X Add	<u>SV</u>	Sally Smith	
Type of Action (Check One)	Title	<u>Name</u>	<u>Addres</u> s
i) X Change		VERCELLI, VALERIA A	5728 MAJOR BLVD STE 309
Add			ORLANDO, FL 32819.
Remove			
2) X Change	<del></del>	BECCI. BRUNO I	5728 MAJOR BLVD STE 309
Add			ORLANDO, FL 32819
Remove Change		the Pall	
Add			
Remove			
4) Change			
Add			
Remove			
5) Change	****		
Add			
Remove			- Company Comp
δ) Change			
Add			
Remove			

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	ditional Articles, en necessary). (Be sp	vecific)			
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an amendment provides	for an eychange r	eclassification	ar cancellation (	of icenad shares	
	ing the amendment	if not containe	d in the amenda	nent itself:	
<u>provisions for implement.</u>	cate N/A)				
if not applicable, indicable					
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	adoption:	, if other than the
date this document was signed.		
Effective date if applicable:		
	(no more than 90 days after amendment file date)	
Note: If the date inserted in this document's effective date on the I	block does not meet the applicable statutory filing requirements, this department of State's records.	date will not be listed as the
Adoption of Amendment(s)	( <u>CHECK ONE</u> )	
The amendment(s) was/were action was not required.	dopted by the incorporators, or board of directors without shareholder ac	ction and shareholder
☐ The amendment(s) was/were as by the shareholders was/were	dopted by the shareholders. The number of votes cast for the amendmen sufficient for approval.	nt(s)
	oproved by the shareholders through voting groups. The following state reach voting group entitled to vote separately on the amendment(s):	ment
"The number of votes cas	t for the amendment(s) was/were sufficient for approval	
by		202
· ·	(voting group)	2023 DEC
11/27/202	3	DEC -1 A
Dated	<del>-</del>	S
Signature	-jet alleakul	
(By a select	director, president or other officer – if directors or officers have not been ed, by an incorporator – if in the hands of a receiver, trustee, or other conted fiduciary by that fiduciary)	a The E
	BRUNO I BECCI	
	(Typed or printed name of person signing)	
	VP	
	(Title of person signing)	

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The date of each amendment(s) adoption:	
date this document was signed	
Effective date if applicable:	
Effective date if applicable: the more than 90 days after amendment file a	ute)
Note: If the date material in this block does not meet the applicable stantons filling required document's effective date on the Department of State's records	name, that dute will not be hated as the
Adaption of Amendment(s) (CHECK ONE)	
in The amendment(s) was were adopted by the incorporators, or board of directors without shall action was not resumed.	reholder action and shareholder
(2) The arriendment(s) was were adopted by the shareholders. The number of votes east for the by the shareholders was/were sufficient for approval.	ameralmeni(s)
The amendment(s) was/were approved by the shareholders through voting groups. The following the separately provided for each witing group intitled to vote separately on the amend	ming statement mentis)
The number of come can for the amendment(s) was were sufficient for approval	
by	
Dated 11 27/2023	
Signature  (By a director, president or other officer – if directors or officers his selected, by an uncorporator – if in the hands of a receiver, unstee, appearated fiduciary by their fiduciary)  ORUNO I BELCI	ve not been or other court
(Typed or printed name of person signing)	
VP	
(Table of person sagning)	

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