(Requestor's Name)
(Address)
(Address)
(City/State/Zip/Phone #)
PICK-UP WAIT MAIL
(Business Entity Name)
(Document Number)
-d Copies Certificates of Status
al Instructions to Filing Officer

Office Use Only



700398470937

12/05/22--01002--019 *+35.00

A. RAMSEY DEC - 6 2022 2022 DEC -5 AH 11: 28

CAPITAL CONNECTION, INC.

417 E. Virginia Street, Suite 1 • Tallahassee, Florida 32301 (850) 224-8870 • 1-800-342-8062 • Fax (850) 222-1222

DO DO LANDS SRL DE C	V CORP	
		
		Art of Inc. File
***************************************		LTD Partnership File
		Foreign Corp. File
		L.C. File
		Fictitious Name File
		Trade/Service Mark
		Merger File
		Art. of Amend. File
		RA Resignation
		Dissolution / Withdrawal
		Annual Report / Reinstatement
		Cert. Copy
		Photo Copy
		Certificate of Good Standing
		Certificate of Status
		Certificate of Fictitious Name
		Corp Record Search
		Officer Search
		Fictitious Search
Signature		Fictitious Owner Search
Signature		Vehicle Search
		Driving Record
Requested by:		UCC 1 or 3 File
		UCC 11 Search
Name Date	Time	UCC 11 Retrieval
Walk-In Will F	Pick Up	Courier

Articles of Amendment to Articles of Incorporation of

2022 DEC -5 AMII: 28

DO DO LANDS SRL DE CV CORP

(Name of Corporation as o	currently filed with the Florida Dept. of State)
P220000	0087469
(Document Nu	lumber of Corporation (if known)
Pursuant to the provisions of section 607.1006, Florida Statut its Articles of Incorporation:	ates, this Florida Profit Corporation adopts the following amendment(s) to
A. If amending name, enter the new name of the corpora	ation:
DO DO LANDS CO	ORP
name must be distinguishable and contain the word "corporat" "Inc.," or Co.," or the designation "Corp," "Inc," or "chartered," "professional association," or the abbreviation	ttion," "company," or "incorporated" or the abbreviation "Corp.," "Co". A professional corporation name must contain the word
B. Enter new principal office address, if applicable: (Principal office address MUST BE A STREET ADDRESS	Σ)
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)	
D. If amending the registered agent and/or registered offi	
new registered agent and/or the new registered office a	address:
Name of New Registered Agent	
(Fic	lorida street address)
New Registered Office Address:	. Florida
	(City) (Zip Code)
New Registered Agent's Signature, if changing Registered I hereby accept the appointment as registered agent. I am fai	d Agent: amiliar 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>	<u>Addres</u> s
1) Change			
Add			
Remove			
2) Change			
Add			
Remove 3) Change			
Add			
Remove			
4) Change			
Add			_
Remove			
5) Change			
Add			
Remove			
6) Change		<u> </u>	
Add			
Remove			

	ets, if necessary).	(Be specific)				
						
_	-					
 				_ -	<u> </u>	_
			_			
						_
· · ·						
<u> </u>	-		<u> </u>			
		_ _			 -	
					· · · · · · · · · · · · · · · · · · ·	
<u> </u>	_					
				 .		
		_			<u> </u>	<u> </u>
						
an amendment pro	vides for an excha-	nge, reclassific	ation or cancel	ation of issued	charac	
<u>provisions for implei</u>	menting the amend	dment if not co	ntained in the a	mendment itse	lf:	
(if not applicable,	, indicate N/A)	-	-		_	
	<u> </u>		···			

The date of each amendment(s) ac date this document was signed.	option:	, if other than t
Effective date if applicable:		
	(no more than 90 days after amendment file date)	
Note: If the date inserted in this bl document's effective date on the De	ock does not meet the applicable statutory filing requirements, this partment of State's records.	date will not be listed as t
Adoption of Amendment(s)	(CHECK ONE)	
署 The amendment(s) was/were adoption was not required.	oted by the incorporators, or board of directors without shareholder a	ction and shareholder
The amendment(s) was/were adop by the shareholders was/were suf	ted by the shareholders. The number of votes cast for the amendmenticient for approval.	nt(s)
The amendment(s) was/were appr must be separately provided for e	oved by the shareholders through voting groups. The following state ach voting group entitled to vote separately on the amendment(s):	ment
	or the unrendment(s) was/were sufficient for approval	
bγ		
	(voting group)	
December Dated	r 2, 2022	
Signature	April 1	
selected,	ctor, president or other officer – if directors or officers have not been by an incorporator – if in the hands of a receiver, trustee, or other confiduciary by that fiduciary)	ı urt
	ALEJANDRO CAPETILLO	
	(Typed or printed name of person signing)	
	PRESIDENT / DIRECTOR	
	(Title of person signing)	