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A. RAMSEY AUG & 2074

COVER LETTER

TO: Amendment Section Division of Corporations

NAME OF CORPOR	AATION: AMERICA'S GAT	EWAY, INC.	
DOCUMENT NUME	P23000001197		
The enclosed Articles	of Amendment and fee are su	bmitted for filing.	
Please return all corres	pondence concerning this ma	tter to the following:	
	CARLOS A MACCHI		
•		Name of Contact Persor	1
	AMERICA'S GATEWAY, E	NC	
		Firm/ Company	
	4627 PONCE DE LEON BO	ULEVARD	
		Address	· · · · · · · · · · · · · · · · · · ·
	CORAL GABLES, FL 3314	6-2130	
		City/ State and Zip Code	2
	MACCHINS@BELLSOUT	H.NET	
	E-mail address: (to be us	sed for future annual report	notification)
For further information	o concerning this matter, plea	se call:	
CARLOS A MACCH	I	at (967-0471
Name (of Contact Person	Area Co	de & Daytime Telephone Number
Enclosed is a check fo	r the following amount made	payable to the Florida Depa	artment of State:
S35 Filing Fee	☐S43.75 Filing Fee & Certificate of Status	S43.75 Filing Fee & Certified Copy (Additional copy is enclosed)	☐\$52.50 Filing Fee Certificate of Status Certified Copy (Additional Copy is enclosed)
Ame Divi P.O.	ling Address endment Section sion of Corporations Box 6327 phassec, FL 32314	Amend Divisio The C	Address Iment Section on of Corporations entre of Tallahassee N. Monroe Street, Suite 810

Tallahassee, FL 32303

Articles of Amendment FILEU

Articles of Incorporation

of

2024 JUL 30 PM 12 55

AMERICA'S GATEWAY, INC.		2024 JUL 3U PM 12 55
(Name o	of Corporation as curren	tly filed with the Florida Dept- of State)
AMERICA'S GATEWAY INC		FALLAHASSEE, FLY MET
**************************************	(Document Number	of Corporation (if known)
Pursuant to the provisions of section 607, its Articles of Incorporation:	1006, Florida Statutes, thi	is Florida Profit Corporation adopts the following amendment
A. If amending name, enter the new na	ime of the corporation:	
	"orp," "Inc," or "Co".	"company," or "incorporated" or the abbreviation "Corp.," A professional corporation name must contain the word
		4627 PONCE DE LEON BOULEVARD
B. Enter new principal office address, if applicable: (Principal office address <u>MUST BE A STREET ADDRESS</u>)		CORAL GABLES, FL 33146-2130
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)		4627 PONCE DE LEON BOULEVARD
		CORAL GABLES, FL 33146-2130
D. If amending the registered agent an new registered agent and/or the nev		
Name of New Registered Agent	JEANNETTE M RODR	IGUES
Mane of New Negisterea Agent	4627 PONCE DE LEON	BOULEVARD
	(Florida ,	street address)
New Registered Office Address:	CORAL GABLES, FL	. Florida 33146-2130
- ALL SALES FOR THE SALES FOR		(Zip Code)

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>	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			
Add			-
Remove			
2) Change			
Add			
Remove 3) Change			
Add			
Remove			
4) Change			
Add			
Remove			
5) Change			
Add			
Remove			
			19.90
6) Change			
Add			
Remove			

ttach additional sheets, if necessary).	(Be specific)		
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an amendment provides for an exch	nge, reclassification, or can	icellation of issued shares.	i e
rovisions for implementing the amer (if not applicable, indicate N/A)	ament ii not contained in ti	<u>ie amendinent itseit:</u>	
(у ил арупсаме, такше мя)			
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18.1		4	
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The date of each amendment(s) addate this document was signed.	option:, if other than the
Effective date <u>if applicable</u> :	
	(no more than 90 days after amendment file date)
Note: If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as to locument's effective date on the Department of State's records.	
Adoption of Amendment(s)	(CHECK ONE)
The amendment(s) was/were add action was not required.	pted by the incorporators, or board of directors without shareholder action and shareholder
☐ The amendment(s) was/were add by the shareholders was/were su	pted by the shareholders. The number of votes east for the amendment(s) fficient for approval.
	roved by the shareholders through voting groups. The following statement each voting group entitled to vote separately on the amendment(s):
"The number of votes cast	for the amendment(s) was/were sufficient for approval
by	(voting group)
Dated 07/17/	2024
Signature (1) and	record, president or other officer – if directors or officers have not been
selecte	I, thy an incorporator – if in the hands of a receiver, trustee, or other court ed fiduciary by that fiduciary)
	JEANNETTE M RODRIGUES
	(Typed or printed name of person signing)
	PRESIDENT

(Title of person signing)