## P23000008182





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## **COVER LETTER**

**TO:** Amendment Section Division of Corporations

NAME OF CO	ORPORATION: GRUPO ODISSE	O INC				
DOCUMENT	naannnn010a					
The enclosed A	Articles of Amendment and fee are s	submitted for filing.				
Please return al	ll correspondence concerning this m	natter to the following:				
	PABLO CALATRAVA					
	Name of Contact Person					
	XPORTA INC					
		Firm/ Company				
	120 NE 27TH STREET SU	ITE 900				
		Address				
	MIAMI, FL 33137					
		City/ State and Zip Cod	e			
	PABLO@XPORTA.US					
	E-mail address: (to be	used for future annual report	notification)			
For further info	ormation concerning this matter, ple	ase call:	8511236			
	Name of Contact Person		ode & Daytime Telephone Number			
Enclosed is a c	heck for the following amount made	e payable to the Florida Dep	partment of State:			
S35 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)			
	Mailing Address Amendment Section Division of Corporations P.O. Box 6327	Ameno Divisio	Address  dment Section on of Corporations  Centre of Tallahassee N. Monroe Street, Suite 810			

## Articles of Amendment to Articles of Incorporation of

GRUPO ODISSEO INC

(Document Number of Constraint to the provisions of section 607.1006, Florida Statutes, this <i>Flori</i> Articles of Incorporation:  If amending name, enter the new name of the corporation:	•	; amendm <b>e</b> nt
rsuant to the provisions of section 607.1006, Florida Statutes, this <i>Flori</i> Articles of Incorporation:	•	; amendm <b>e</b> nt
Articles of Incorporation:	ida Profit Corporation adopts the following	; amendm <b>e</b> nt
If amending name, enter the new name of the corporation:		
		The new
me must be distinguishable and contain the word "corporation," "comp nc.," or Co.," or the designation "Corp," "Inc," or "Co", A pro hartered," "professional association," or the abbreviation "P.A."		
Enter new principal office address, if applicable:		
rincipal office address <u>MUST BE A STREET ADDRESS</u> )		
Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)		
		-
<del>-</del>		
<del>-</del>		<u></u>
If amending the registered agent and/or registered office address new registered agent and/or the new registered office address:	in Florida, enter the name of the	JUN 13
new registered agent and/or the new registered office address.		ာ ရှိ .
Name of New Registered Agent		AH W
47		
(Florida street de	ddress)	0
New Registered Office Address:  (City	, Florida	oula)
(CII)	, tap c	ите)

 $\Box$  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>	<u>John Doe</u>	
X Remove	$\underline{\mathbf{V}}$	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	Р	MARIA TERESA BALVIN CARCE	120 NE 27TH STREET SUITE 900
Add			MIAMI, FL 33137
A Remove  2) Change	ľ	ALBERTO BELMONTE BALVIN	CALLE SIERRA DE CAZORLA
X Add			22 PBJ, ESPARRAGAL
Remove 3) Change			MURCIA, SPAIN
Add			
Remove			
4) Change			
Add			
Remove			
5) Change			
Add			
Remove			
6) Change			
Add			
Remove			

tach additional sheets, if necessary)	). (Be specific)	
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	the control of the co	
ovisions for implementing the an	change, reclassification, or cancellation of issued shares, nendment if not contained in the amendment itself:	
(if not applicable, indicate N/A)	·	
<u>,, , , ,</u>		<del></del>

The date of each amendment(s)	adoption:	, if other than the
date this document was signed.	5/06/2023	
Effective date <u>if applicable</u> :	(no more than 90 days after amendment file date)	
Note: If the date inserted in this document's effective date on the	block does not meet the applicable statutory filing requirements, the Department of State's records.	is date will not be listed as the
Adoption of Amendment(s)	(CHECK ONE)	
☐ The amendment(s) was/were a action was not required.	adopted by the incorporators, or board of directors without shareholde	r action and shareholder
■ The amendment(s) was/were a by the shareholders was/were	idopted by the shareholders. The number of votes cast for the amenda sufficient for approval.	nent(s)
	approved by the shareholders through voting groups. The following st 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	'
by	(voting group)	
selec	director, president or other officer – if directors or officers have not leted, by an incorporator – if in the hands of a receiver, trustee, or other ointed fiduciary by that fiduciary)  JORGE CARLOS CAMESELLE MELLINA  (Typed or printed name of person signing)	
	VICEPRESIDENT	
	(Title of person signing)	