## P23000023479

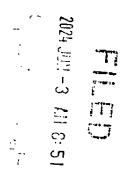
(Requestor's Name)				
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## **COVER LETTER**

TO: Amendment Section Division of Corporations

NAME OF CORPOR	RATION: DOOR MAGENTA	A CORP			
DOCUMENT NUME	BER: P23000023479	*			
	of Amendment and fee are su	bmitted for filing.			
Please return all corres	spondence concerning this ma	tter to the following:			
	Maria V. Delgado Escobar				
		Name of Contact Person	<del></del>		
	DOOR MAGENTA CORP				
	Firm/ Company				
	2222 Flagler Promenade Way	Suite 108			
	Address				
	Maitland, FL 32751				
	City/ State and Zip Code				
	mavidel@gmail.com				
	E-mail address: (to be us	sed for future annual report	notification)		
For further informatio	n concerning this matter, plea.	se call:			
Maria V Delgado Escobar		at (407	334-6220		
Name of Contact Person		Area Coo	de & Daytime Telephone Number		
Enclosed is a check fo	or the following amount made	payable to the Florida Depa	rtment of State:		
S35 Filing Fee	☐S43.75 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 Div P.O	endment Section ision of Corporations . Box 6327 ahassee, FL 32314	Amend Division The Co 2415 N	Address ment Section n of Corporations entre of Tallahassee J. Monroe Street, Suite 810 ssee, FL 32303		

## Articles of Amendment to Articles of Incorporation of

DOOR MAGENTA CORP	FILED
(Name of Corporation as current	tly filed with the Florida Dept. of State)
P23000023479	2024 JUN - 3 AN 8: 52
(Document Number	of Corporation (if known)
Pursuant to the provisions of section 607.1006, Florida Statutes, this its Articles of Incorporation:	s Florida Profit Corporation adopts the following amendment(s)
A. If amending name, enter the new name of the corporation:	
	The new
name must be distinguishable and contain the word "corporation," "Inc.," or Co.," or the designation "Corp," "Inc," or "Co". "chartered," "professional association," or the abbreviation "P.A.	"company," or "incorporated" or the abbreviation "Corp.,"  A professional corporation name must contain the word
B. Enter new principal office address, if applicable:	2222 Flagler Promenade Way Suite 108
(Principal office address MUST BE A STREET ADDRESS)	Maitland, FL 32751
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)	2222 Flagler Promenade Way Suite 108
(1)	Maitland, FL 32751
D. If amending the registered agent and/or registered office ad- new registered agent and/or the new registered office address	
	_
Name of New Registered Agent	14.4
(Florida s	treet address)
7 10 114 3	Tet dan 33y
New Registered Office Address:	, Florida (City) (Zip Code)
	(city)
New Registered Agent's Signature, if changing Registered Agen	ut:
I hereby accept the appointment as registered agent. I am familian	with and accept the obligations of the position.
Signature of New	Registered Agent, if changing
Cheat if applicable	
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)	Title	<u>Name</u>	<u>Addres</u> s	
1) Change	VP	Giovana Y. Shellhammer	1128 BELLA VISTA CIR	
Add			LONGWOOD, FL 32779	
X Remove				
2) Change				
Add				
Remove 3) Change				
Add				
Remove				
4) Change				
Add				
Remove				
5) Change				
Add				
Remove				
6) Change			<del></del>	
Add			<del></del>	
Remove				

attach <i>addition</i>	adding additional Art I sheets, if necessary).	(Be specific)			
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an amandma	it provides for an excl	hanne reclassifica	tion or cancellatio	on of issued share	<b>«</b>
an amendine	implementing the ame	endment if not con	tained in the ame	ndment itself:	7
(if not ann	icable, indicate N/A)	indifferent in not con	tamed in the unit	The state of the s	
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The date of each amendment	s) adoption:	, if other than the
date this document was signed.	04/23/2024	
Effective date if applicable:		
	(no more than 90 days afte	r amendment file date)
	nis block does not meet the applicable statut e Department of State's records.	ory filing requirements, this date will not be listed as the
Adoption of Amendment(s)	( <u>CHECK ONE</u> )	
■ The amendment(s) was/were action was not required.	adopted by the incorporators, or board of di	rectors without shareholder action and shareholder
☐ The amendment(s) was/wer- by the shareholders was/we	e adopted by the shareholders. The number of sufficient for approval.	f votes east for the amendment(s)
	approved by the shareholders through voting for each voting group entitled to vote separa	
"The number of votes	cast for the amendment(s) was/were sufficien	at for approval
by	(voting group)	<u>.</u>
	(voting group)	
Dated <u>x</u> C	4/23/2023	
se	a director, president or other officer – if directed by an incorporator – if in the hands of pointed fiduciary by that fiduciary)	
	Maria V. Delgado Escobar	
	(Typed or printed name of pe	rson signing)
	President	
	(Title of person signing)	