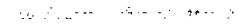
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S ROBERTS
JUL 2 4 2023

COVER LETTER

* TO: Amendment Section Division of Corporations

NAME OF CORP	ORATION: UMAKIPI CORP			
	MBER: P23000027175			
	<i>les of Amendment</i> and fee are su	bmitted for fil	ng.	
Please return all co	rrespondence concerning this ma	tter to the folk	owing:	
	SABA, JOANNA G			
		Name of C	ontact Person	1
	UMAKIPI CORP			
		Firm/ (Company	
	7931 SW 36 TERRACE		, ,	
	w- <u>-</u>	Ad	dress	
	MIAMI, FL 33155			
		City/ State	and Zip Cod	<u> </u>
		-	•	
	umakipi.co@gmail.com E-mail address: (to be us	1.0		
For further informa	tion concerning this matter, pleas		786	
Nan	ne of Contact Person	41.1	Area Co	de & Daytime Telephone Number
Enclosed is a check	for the following amount made	payable to the		
S35 Filing Fee	□S43.75 Filing Fee & Certificate of Status	S43.75 Fi Certified ((Additiona enclosed)	Copy Leopy is	S52.50 Filing Fee Certificate of Status Certified Copy (Additional Copy is enclosed)
Р Р	Mailing Address Imendment Section Division of Corporations I.O. Box 6327 Callahassee, FL 32314		Amend Division The C	Address Iment Section on of Corporations entre of Tallahassec N. Monroe Street, Suite 810

Tallahassee, Fl. 32303

Articles of Amendment to Articles of Incorporation of

۱	JN	I.A.	K	112	(Ω	ŧΙ	þ

(<u>Name</u>	of Corporation as currer	ntly filed with the Florida Dept. of State)	
P23000027175			
	(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 follow	ing amendment(s)
A. If amending name, enter the new n	ame of the corporation:		
N/A			The new
name must be distinguishable and contain "Inc.," or Co.," or the designation "C "chartered," "professional association,"	Corp," "Inc," or "Co".	"company," or "incorporated" or the abbrevia A professional corporation name must cont ."	tion "Corp.,"
B. Enter new principal office address, if applicable: (Principal office address <u>MUST BE A STREET ADDRESS</u>)		7931 SW 36 TERRACE	
		MIAMI, FL 33155	
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)		7931 SW 36 TERRACE	2023 .
•		MIAMI, FL 33155	:
			
If amending the registered agent at new registered agent and/or the new		dress in Florida, enter the name of the	ું ; ડ્
	SABA JOANNA G	30.	ဘ
<u>Name of New Registered Agent</u>	-		_
	(Florida :	street address)	_
New Registered Office Address:	7931 SW 36 TERRACE		
<u>wew Registered Office Address</u> .	, Florida (Zip C		o Code)
		(C.iy) (Zi _l	o Code)
New Registered Agent's Signature, if c	hanging Registered Age	nt:	
thereby accept the appointment as regist	ered agent Lam familia: (r with and accept the obligations of the position $f(\cdot)$	
		H	
	Signature of New	Registered Agent, if changing	

Check if applicable

 $[\]square$ 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.

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	P	SABA JOANNA G	9925 COSTA DEL SOL BLVD
Add			DORAL, FL 33178
X Remove			
2) Change	P	SABA JOANNA G	7931 SW 36 TERRACE
X Add			MIAMI, FL 33155
Remove 3) Change			
Add			
Remove			
4) Change			
Add			
Remove			
5) Change		<u> </u>	
Add			
Remove			
6) Change			
Add			
Remove			

	onal sheets, if necessary).). (Be specific)
N/A		
•		
<u> </u>		
	=	
•—		
If an amandn	aant neavidae far an avo	change, reclassification, or cancellation of issued shares,
nrovisions fo	or implementing the am	nendment if not contained in the amendment itself:
(if not ap	oplicable, indicate N/A)	
I/A		
		<u> </u>

•

	05/26/2023	
The date of each amendment(s)	adoption:	, if other than the
date this document was signed.		
	5/30/2023	
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	s block does not meet the applicable statutory filing requirements, Department of State's records.	this date will not be listed as the
Adoption of Amendment(s)	(<u>CHECK ONE</u>)	
The amendment(s) was/were a action was not required.	adopted by the incorporators, or board of directors without sharehold	er action and shareholder
☐ The amendment(s) was/were a by the shareholders was/were	adopted by the shareholders. The number of votes east for the amend sufficient for approval.	lment(s)
	approved by the shareholders through voting groups. The following store each voting group entitled to vote separately on the amendment(s	
"The number of votes ca	ist for the amendment(s) was/were sufficient for approval	
by	,	
<u> </u>	(voting group)	
05/30/20	23	
Dated		
selec	director, president or other officer – if directors or officers have not eted, by an incorporator – if in the hands of a receiver, trustee, or other officery by that fiduciary)	
	SABA JOANNA G	
	(Typed or printed name of person signing)	
	þ	
	(Title of person signing)	· - · · ·