P23000032401

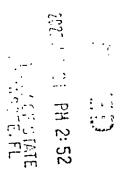
(Requestor's Name)
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(Business Entity Name)
(Document Number)
Certified Copies Certificates of Status
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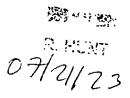
Office Use Only



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COVER LETTER

TO: Amendment Section Division of Corporations NAME OF CORPORATION: Contointerprises Inc DOCUMENT NUMBER: p23000032401 The enclosed Articles of Amendment and fee are submitted for filing. Please return all correspondence concerning this matter to the following: Aylene Melendez Cotto Name of Contact Person Aylene Melendez Cotto Firm/ Company Cottointerprises Inc. Address 1200 Brickell ave Suite 1950 Miami FL 33131 City/ State and Zip Code aylenecotto@gmail.com E-mail address: (to be used for future annual report notification) For further information concerning this matter, please call: at (9176158549) ______ Area Code & Daytime Telephone Number Aylene Melendez Cotto Name of Contact Person Enclosed is a check for the following amount made payable to the Florida Department of State: S52.50 Filling Fee S35 Filing Fee ☐543.75 Filling Fee & ☐\$43.75 Filing Fee & Certificate of Status-Certified Copy Certificate of Status (Additional copy is Certified Copy enclosed) (Additional Copy is enclosed) Street Address Mailing Address Amendment Section Amendment Section Division of Corporations Division of Corporations

> P.O. Box 6327 Tallahassee, FL 32314

The Centre of Tallahassee

Tallahassee, FL 32303

2415 N. Monroe Street, Suite 810

Articles of Amendment to Articles of Incorporation of

(Name	of Corporation as currently	filed with the Florida Dept. o	of State)
Cottointerprises Inc			
	(Document Number of	Corporation (if known)	
Pursuant to the provisions of section 607 its Articles of Incorporation:	.1006, Florida Statutes, this F	lorida Profit Corporation adop	ests the following amendment(s)
A. If amending name, enter the new n	ame of the corporation:		
Cotto Enterprise Inc			The new
name must be distinguishable and contain "Inc.," or Co.," or the designation "Contrartered," "professional association,"	Corp." "Inc." or "Co". A	ompany," or "incorporated" or professional corporation nan	the abbreviation "Corp.," we must contain the word
B. Enter new principal office address, if applicable:		1200 Brickell Ave suite 1950) Miami Fl 33131
(Principal office address MUST BE A S	TREET ADDRESS)		
			.,,
			<u> </u>
C. Enter new mailing address, if appl	icable:	1200 beickell Ave suite 1950	Miami El 33tá - T
(Mailing address MAY BE A POST	OFFICE BOX)		mail = g
			100 N
			14. VIE. 25.
			£.1.
 If amending the registered agent at new registered agent and/or the ne 		ess in Fiorida, enter the name	of the
Name of New Registered Agent	legaline corporation service.	s Inc	
Name ty Neg Meg Mereu Agem	· · · · · · · · · · · · · · · · · · ·		
	· Florida stre	et address)	
Variable and Alabara the	476 Riverside Ave Jacksony	ille	Horida 32202
New Registered Office Address:			(Zip Code)
New Registered Agent's Signature, if c Thereby accept the appointment as regis		ith and accept the obligations (of the position.
	,	•	•
·			
	Virginian of Viva D.	gistered Agent, if changing	
	signature of New Rey	діметса ядені, ң спандінд	

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.

X Change	<u>PT</u> <u>Joh</u>	nn Doe	
X Remove	<u>V</u> <u>Mi</u>	ke Jones	
X Add	<u>SV</u> <u>Sal</u>	lly Smith	
Type of Action (Check One)	Title	<u>Name</u>	Addiess
F) Change	P	Aylene Cotto	25 NE 5th St 2024 Miami FL 33131
X Add			
Remove 2) Change	<u>s</u>	Еуа Соно	1129 Buckingham St SW Wyoming
X Add Remove	CFO	Joseph Cotto	25 NE 5th ST Miami FL 33132
3) Change X Add	•		
Remove 4) Change			
Add			
Remove 5) Change			762
Add			
Remove 5) Change			S - P : 1
Add			2: 52 E. FL
Remove			<u> </u>

. If amending or adding additional Articles, enter change(s) here: (Attach additional sheets, if necessary).—(Be specific)	
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<u> </u>	
	
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If an amendment provides for an exchange, reclassification, or cancellation of issued shares,	
provisions for implementing the amendment if not contained in the amendment itself: (if not applicable, indicate N/A)	
A	
A	
	
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The date of each amendment(s) a late this document was signed.	adoption:		i	if other	than the
	AllA				
ffective date <u>if applicable</u> :	(no more than 90 days afte	r amendment file date)			
fote: If the date inserted in this locument's effective date on the D	block does not meet the applicable statut repartment of State's records.	ory filing requirements, this dat	e will not	be liste	ed as the
doption of Amendment(s)	(<u>CHECK ONE</u>)	ı			
The amendment(s) was/were ad action was not required.	lopted by the incorporators, or board of di	rectors without shareholder actio	n and shai	reholder	r
by the shareholders was/were s	•				
by the shareholders was/were s The amendment(s) was/were ap		g groups. The following stateme.			
by the shareholders was/were s The amendment(s) was/were ap must be separately provided for "The number of votes case	ufficient for approval. proved by the shareholders through votin r each voting group entitled to vote separa t for the amendment(s) was/were sufficient	g groups. The following stateme, ately on the amendment(s):		2003	
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