P23000062101

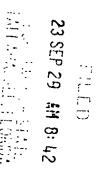
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COVER LETTER

TO: Amendment Section
Division of Corporations

NAME OF CORPO					
DOCUMENT NUM	P23000062101 DOCUMENT NUMBER:				
The enclosed Articles	s of Amendment and fee are su	bmitted for filing.			
Please return all corre	espondence concerning this ma	tter to the following:			
	Myrna Sterling				
		Name of Contact Person			
	5250 NW 84TH AVE #1713	Firm/ Company			
	Miami, Fl 33166	Address			
		City/ State and Zip Code			
	myrna.sterling@robeks.net				
	E-mail address: (to be us	sed for future annual report	notification)		
For further information concerning this matter, please call:					
Myrna Sterling		786 at (2471784		
Name	of Contact Person		de & Daytime Telephone Number		
Enclosed is a check for	or the following amount made	payable to the Florida Depa	rtment of State:		
□ \$35 Filing Fee	S\$43.75 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 Tallahassee, FL 32314		Amendi Division The Ce 2415 N	Address ment Section n of Corporations entre of Tallahassee I. Monroe Street, Suite 810 ssee, FL 32303		

Articles of Amendment to Articles of Incorporation

		•	3
	Articles	of Amendment to	ن الم
	Articles o	of Incorporation	
		of	10 10 10 10 10 10 10 10 10 10 10 10 10 1
COFFE CITO	305	CORP.	lorida Dept. of State)
(Name of Co	rporation as cur	rently filed with the F	lorida Dept. of State)
P 2300	00 62	101	
	(Document Num	ber of Corporation (if k	nown)
ursuant to the provisions of section 607.1006, s Articles of Incorporation:	Florida Statutes,	this <i>Florida Profit Con</i>	poration adopts the following amendment(s)
If amending name, enter the new name of	of the corporatio	<u>n:</u>	
12/ C-			The new
ame must be distinguishable and contain the w Inc.," or Co.," or the designation "Corp, chartered," "professional association," or th	" "Inc," or "Co	". A professional col	orporated" or the abbreviation "Corp.," rporation name must contain the word
B. Enter new principal office address, if apprincipal office address MUST BE A STRE		W/a	
Enter new mailing address, if applicable (Mailing address MAY BE A POST OFF)	(CE BOX)	μ/c	
 If amending the registered agent and/or new registered agent and/or the new reg 	registered office additional o	: address in Florida, e: dress:	iter the name of the
•	1/c_		
	(Flori	ida street address)	
New Registered Office Address:	(co. udu. css/	, Florida
		(City)	(Zip Code)
lew Registered Agent's Signature, if chang hereby accept the appointment as registered	ing Registered A agent. I am fam	sgent: iliar with and accept th	e obligations of the position.
	Signature of N	lew Registered Agent, ij	Changing
Thack if applicable	.	3	0 - 0

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>	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>	<u>Addres</u> s	
1) Change	P 	Myrna Sterling	5250 NW 84TH AVE Miami, Fl 33166	
Add Remove 2) Change	Vp 	Maria Sabogal	10473 NW 78th Terr Doral FI 33178	
Add Remove 3) x Change	ST	Valeria ORONZO-Sterling	5250 NW 84TH AVE Miami FL 33166	
Add Remove 4) Change Add				
Remove 5) Change Add				
Remove 6) Change Add Remove	<u></u>			

Attach additional sheets, if necessary).	(Be specific)
 -	
If an amendment provides for an excl	nange, reclassification, or cancellation of issued shares, adment if not contained in the amendment itself:
(if not applicable, indicate N/A)	a Sterling, 49 Percent Maria Sabogal, 1 % Valeria ORONZO Sterling
(if not applicable, indicate N/A)	a Sterling, 49 Percent Maria Sabogal, 1 % Valeria ORONZO Sterling
(if not applicable, indicate N/A)	a Sterling, 49 Percent Maria Sabogal, 1 % Valeria ORONZO Sterling
(if not applicable, indicate N/A)	a Sterling, 49 Percent Maria Sabogal, 1 % Valeria ORONZO Sterling
(if not applicable, indicate N/A)	a Sterling, 49 Percent Maria Sabogal, 1 % Valeria ORONZO Sterling
(if not applicable, indicate N/A)	a Sterling, 49 Percent Maria Sabogal, 1 % Valeria ORONZO Sterling
(if not applicable, indicate N/A)	a Sterling, 49 Percent Maria Sabogal, 1 % Valeria ORONZO Sterling

The date of each amendment(s) add date this document was signed. 09/20/	pption:	, if other than the
	2023	
Effective date if applicable:	(no more than 90 days after amend	dment file date)
Note: If the date inserted in this blo document's effective date on the Dep	ock does not meet the applicable statutory filinartment of State's records.	ng requirements, this date will not be listed as the
Adoption of Amendment(s)	(CHECK ONE)	
The amendment(s) was/were adopaction was not required.	ted by the incorporators, or board of directors	without shareholder action and shareholder
☐ The amendment(s) was/were adop by the shareholders was/were suff	ted by the shareholders. The number of votes icient for approval.	cast for the amendment(s)
	oved by the shareholders through voting group ach voting group entitled to vote separately on	
"The number of votes cast fo	br the amendment(s) was/were sufficient for ap bogal and Valence (voting group)	proval
Dated	ector, president or other officer— if directors or by an incorporator— if in the hands of a received fiduciary by that fiduciary)	officers have not been
	Vale ma Droite -	Myria Sterding
_	(Typed or printed name of person sig	ening)
	SECRETARY /TERGUE.	PRESICENT
	(Title of person signing)	