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SECRETARY OF STATE ALLARICATE, FLORIDA

COVER LETTER

TO: Amendment Section
Division of Corporations

NAME OF CORPO	RATION: BREEZO MASTE	R CLASS CORP		
	BER: P23000072237	2000		
The enclosed Articles	of Amendment and fee are su	bmitted for filing.		
Please return all corre	spondence concerning this ma	tter to the following:		
	CATALINA, MARIA J			
		Name of Contact Person	1	
		Firm/ Company		
	5790 NW 113 PLACE			
	Address			
	DORLA, FL 33178			
		City/ State and Zip Code	e	
	catalinajimena@gmail.com			
	E-mail address: (to be us	sed for future annual report	notification)	
For further informatio	n concerning this matter, plea	se call:		
CATALINA, MARIA	\ J	at (⁷⁸⁶) 515-4803 de & Daytime Telephone Number	
Name of Contact Person		Area Co	de & Daytime Telephone Number	
Enclosed is a check fo	or the following amount made	payable to the Florida Depa	artment 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 Tallahassee, FL 32314		Street Address Amendment Section Division of Corporations The Centre of Tallahassee 2415 N. Monroe Street, Suite 810		

Tallahassee, FL 32303

Articles of Amendment Articles of Incorporation of

BREEZO MASTER CLASS CORP	
(Name of Corporation as current	tly filed with the Florida Dept. of State)
P23000072237	
(Document Number of	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.	A professional corporation name must contain the word
B. Enter new principal office address, if applicable: (Principal office address MUST BE A STREET ADDRESS)	
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX) D. If amending the registered agent and/or registered office address new registered agent and/or the new registered office address	
(Florida st	street address)
New Registered Office Address:	, Florida
	(City) (Zip Code)
New Registered Agent's Signature, if changing Registered Agen I hereby accept the appointment as registered agent. I am familiar	
Signature of New I	Registered Agent, if changing
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 Do	<u>oe</u>	
X Remove	<u>v</u>	Mike Jo	ones	
X Add	<u>sv</u>	Sally Sr	<u>nith</u>	
Type of Action (Check One)	<u>Title</u>		<u>Name</u>	<u>Addres</u> s
1) Change	VP	_	CATALINA, DEBORA R	8870 NW 36 ST APT 3415
Add				DORAL, FL 33178
x Remove				
2) Change		_		
Add				
Remove 3) Remove		_		
Add				
Remove				
4) Change				
Add				
Remove				
5) Change		·		
Add				
Remove				
6) Change				
Add				
Remove				

	cles, enter change (Be specific)			
EMOVE: CATALINA, DEBORA R				
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		-		
		<u>.</u>		
<u></u>				
			·	
				<u> </u>
	ange, reclassificat	ion, or cancellation	of issued shares,	
If an amendment provides for an exch			lanca itaalfi	
If an amendment provides for an exch provisions for implementing the ame	ndment if not con	tained in the amend	iment itsen:	
If an amendment provides for an exch provisions for implementing the ame (if not applicable, indicate N/A)	ndment if not con	tained in the amend	iment itsen:	
provisions for implementing the ame	ndment if not con	tained in the amend	mient isen:	
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provisions for implementing the ame	ndment if not con	tained in the amend	inient itsen:	

. . .

The date of each amendment(s) ac	loption: 08/15/2024	, if other than the
date this document was signed.	•	
Effective date if applicable: 08/1	5/2024	
	(no more than 90 days after amendme	ent file date)
Note: If the date inserted in this b document's effective date on the De	lock does not meet the applicable statutory filing partment of State's records.	requirements, this date will not be listed as the
Adoption of Amendment(s)	(CHECK ONE)	
The amendment(s) was/were add action was not required.	pted by the incorporators, or board of directors wit	hout shareholder action and shareholder
☐ The amendment(s) was/were add by the shareholders was/were su	pted by the shareholders. The number of votes cas fficient for approval.	t for the amendment(s)
☐ The amendment(s) was/were app must be separately provided for	roved by the shareholders through voting groups. each voting group entitled to vote separately on the	The following statement e amendment(s):
"The number of votes cast	for the amendment(s) was/were sufficient for appro	oval
by	(voting group)	
, ,	(voting group)	
08/15/2024		
Dated 08/15/2024	2 2 2	
Signature	Main Jimons Cat, Elia	_
(By a di selected	rector, president or other officer – if directors or of l, by an incorporator – if in the hands of a receiver, ed fiduciary by that fiduciary)	
	CATALINA, MARIA J	
	(Typed or printed name of person signing	ng)
	PRESIDENT	
	(Title of person signing)	

• • • •