P23000085693

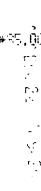
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COVER LETTER

TO: Amendment Section Division of Corporations

NAME OF CORPORATION: QUIGIG, K.C. COP					
DOCUMENT NUMBER: \$230000 85 693					
The enclosed Articles of Amendment and fee are submitted for filing.					
Please return all correspondence concerning this matter to the following:					
Diana Abreu					
Direct Permits & More					
Firm/ Company 16350 SW 112 ave					
Miami Fl 3-3157					
City/ State and Zip Code					
E-mail address: (to be used for future annual report notification)					
For further information concerning this matter, please call:					
Diana Abrey 1786, 325-4407					
Name of Contact Person Area Code & Daytime Telephone Number					
Enclosed is a check for the following amount made payable to the Florida Department of State:					
\$35 Filing Fee \$\begin{array}{ c c c c c c c c c c c c c c c c c c c					
Mailing AddressStreet AddressAmendment SectionAmendment SectionDivision of CorporationsDivision of CorporationsP.O. Box 6327The Centre of TallahasseeTallahassee, FL 323142415 N. Monroe Street, Suite 810					

Tallahassee, FL 32303

Articles of Amendment

to

Articles of Incorporation of

Quiala.K.C Corporation as currently P230000 85693	
(Name of Corporation as currently	filed with the Florida Dept. of State)
1230000 85 6 93	
(Document Number of C	Corporation (if known)
Pursuant to the provisions of section 607.1006, Florida Statutes, this <i>Flatis</i> Articles of Incorporation:	orida Profit Corporation adopts the following amendment(s) to
A. If amending name, enter the new name of the corporation:	
	The new
name must be distinguishable and contain the word "corporation," "co "Inc.," or Co.," or the designation "Corp," "Inc." or "Co". A "chartered," "professional association," or the abbreviation "P.A."	mpany," or "incorporated" or the abbreviation "Corp.,"
B. Enter new principal office address, if applicable: (Principal office address MUST BE A STREET ADDRESS)	<u> </u>
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)	nla
D. If amending the registered agent and/or registered office address: Name of New Registered Agent	ss in Florida, enter the name of the
(Florida stree	t address)
New Registered Office Address:(C	Tity), Florida
·	
New Registered Agent's Signature, if changing Registered Agent: I hereby accept the appointment as registered agent. I am familiar wi	th and accept the obligations of the position.
Signature of New Reg	istered 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)

Example:

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>\$V</u>	Sally Smith	
Type of Action (Check One) 1) Change	Title	Name Quiala Cancio O, Snay S, R	Address 3841 NW66 AVE #Z Virginia gardens, Fl 33166
Add Remove 2) Change Add	P	Quigla cancio, osnay	3841 NW 66AVE APHTZ Virginia gardens, F1 33166
3) Remove Change Add	<u></u>		2.2
Remove 4) Change Add			
Remove 5) Change Add			
Remove 6) Change Add		***************************************	
Remove			

E. If amending or adding addition (Attach additional sheets, if neces	sary). (Be specific)	
	- 1/W	
		
		
		
		
F. If an amondment annuides four		
provisions for implementing th	n exchange, reclassification, or cancellation of issued she amendment if not contained in the amendment itself:	ares,
(if not applicable, indicate N	//A) ;	
<u> </u>	$-\Lambda II$	
	// [W	
·· ·		

The date of each amendment(s) adoption:	, if other than
date this document was signed.	
Effective date <u>if applicable</u> :	
(no more than 90 days af	ier amendment file date)
Note: If the date inserted in this block does not meet the applicable state document's effective date on the Department of State's records.	utory filing requirements, this date will not be listed a
Adoption of Amendment(s) (CHECK ONE)	
The amendment(s) was/were adopted by the incorporators, or board of action was not required.	directors without shareholder action and shareholder
☐ The amendment(s) was/were adopted by the shareholders. The number by the shareholders was/were sufficient for approval.	of votes cast for the amendment(s)
☐ The amendment(s) was/were approved by the shareholders through voti must be separately provided for each voting group entitled to vote separately.	
"The number of votes cast for the amendment(s) was/were suffici	ent for approval
by	
(voting group)	
Dated 12/18/22	
Signature	. ?
(By a director president or other officer – if di selected, by an incorporator – if in the hands o	rectors or officers have not been f a receiver, trustee, or other court
appointed fiduciary by that fiduciary)	^3
Osnay Qui	9/a Cancio erson signing)
0	
<u> </u>	- -
(Title of person signing)	

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