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COVER LETTER

TO: Amendment Section Division of Corporations

NAME OF CORPO	DRATION: DOSOJOS INC		
DOCUMENT NUN	P2 1000030076		
The enclosed Article	es of Amendment and fee are su	bmitted for filing.	
Please return all corr	respondence concerning this ma	atter to the following:	
	LAURA SAENZ		
		Name of Contact Perso	n
		Firm/ Company	
	15687 LOCH MAREE LN, 1	N APT 2402	
		Address	
	DELRAY BEACH, FL 3344	6	
	·	City/ State and Zip Cod	<u> </u>
	laurasaenzcardenas@gmail.c	om	
	E-mail address: (to be us	sed for future annual report	notification)
For further informati Laura Saenz	on concerning this matter, plea	se call: 786	644-5991
	e of Contact Person	at ()
Name	of Confact Person	Area Co	de & Daytime Telephone Number
Enclosed is a check t	for the following amount made	payable to the Florida Dep	artment of State:
S35 Filing Fee	☐\$43.75 Filing Fee & Certificate of Status	S43.75 Filing Fee & Certified Copy (Additional copy is enclosed)	S52.50 Filing Fee Certificate of Status Certified Copy (Additional Copy is enclosed)
An Dir P.C	needing Address December Section Section of Corporations D. Box 6327 Hahassee, FL 32314	Ameno Divisio The C 2415 I	Address Iment Section on of Corporations entre of Tallahassee N. Monroe Street, Suite 810 assee, FL 32303

Articles of Amendment to Articles of Incorporation of

DOSOJOS INC	
	on as currently filed with the Florida Dept. of State)
24000030076	
(Docun	ment Number of Corporation (if known)
ursuant to the provisions of section 607,1006, Florida s Articles of Incorporation;	a Statutes, this Florida Profit Corporation adopts the following amendmen
. If amending name, enter the new name of the co	orporation:
	The new
ame must be distinguishable and contain the word "co	orporation," "company," or "incorporated" or the abbreviation "Corp.,"
Inc.," or Co.," or the designation "Corp." "Inc."	" or "Co". A professional corporation name must contain the word
chartered," "professional association," or the abbre	eviation "P.A,"
Enter new principal office address, if applicable	
Principal office address MUST BE A STREET ADD	
	
	()
Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BO	W)
(Muning address MAT BE A FOST OFFICE BO.	<u> </u>
	
N. Mariner alternation of the contract of the	
	red office address in Florida, enter the name of the
new registered agent and/or the new registered	office address:
Name of New Registered Agent	
	(Florida street address)
New Registered Office Address:	Florida
New Registered Office Address.	(City) (Zip Code)
	• • • • • • • • • • • • • • • • • • • •
ew Registered Agent's Signature, if changing Reg	istered Agent:
nereoy accept the appointment as registered agent.	I am familiar with and accept the obligations of the position.
Signa	ature of New Registered Agent, if changing

Check if applicable

☐ The amendment(s) is/are being filed pursuant to s. 607.0120 (11) (c), F.S.

If amending the Officers and/or Directors, enter the title and name of each officer/director being removed and title, name, at 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 = Chi Executive Officer; CFO = Chief Financial Officer. If an officer/director holds more than one title, list the first letter of each office hel 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 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 Chang Mike Jones, V as Remove, and Sally Smith, SV as an Add.

Example: 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>	Address
1) Change	TD	DANIELA PALACIO	15687 LOCH MAREE LN N
Add			APT 2402
x Remove			DELRAY BEACH, FL 33446
2) Change			
Add			
Remove Change			
Add			
Remove			
4) Change	10 - 11		
Add			
Remove			
5) Change			
Add			
Remove			
6) Change			
Add			
Remove			

	ling additional Art heets, if necessary).	(Be specific)				
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provisions for imp	lementing the amo	endment if not co	ontained in the ar	nendment itself:	ares,	
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The date of each amendment(s) adoption: date this document was signed.	if other than t
date this document was signed.	
Effective date <u>if applicable</u> :	o more than 90 days after amendment file date)
(n	o more than 90 days after amenament fite date)
Note: If the date inserted in this block does not n document's effective date on the Department of Sta	neet the applicable statutory filing requirements, this date will not be listed as te's records.
Adoption of Amendment(s) (CHEC	K ONE)
The amendment(s) was/were adopted by the ince action was not required.	orporators, or board of directors without shareholder action and shareholder
☐ The amendment(s) was/were adopted by the shareholders was/were sufficient for appr	reholders. The number of votes cast for the amendment(s) oval.
	archolders through voting groups. The following statement up entitled to vote separately on the amendment(s):
"The number of votes cast for the amendm	ent(s) was/were sufficient for approval
by	
(voting)	group)
05-09-2024 Dated	
Signature _	SATUL
	or other officer – if directors or officers have not been rator – if in the hands of a receiver, trustee, or other court that fiduciary)
LAURA SAEN	Z
СТур	ed or printed name of person signing)
PRESIDENT	
CTitle	e of person signing)