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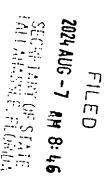
(Requestor's Name)			
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PICK-UP	☐ WAIT	MAIL	
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## **COVER LETTER**

TO: Amendment Section Division of Corporations

NAME OF CORPORATION:IGNUS A	DVANCES CORP
DOCUMENT NUMBER: P24000046736	
The enclosed Articles of Amendment and fee	e are submitted for filing.
Please return all correspondence concerning	this matter to the following:
JAASIEL D GARCE	ES CHIRINOS
	Name of Contact Person
	Firm/ Company
1500 N UNIVERSIT	Y DR SUITE 2001-S
	Address
CORAL SPRINGS	FL 33071
	City/ State and Zip Code
eb_tax@hotmail.com	
E-mail address: (	to be used for future annual report notification)
For further information concerning this matte	er, please call:
JAASIEL D GARCES CHIRINOS	at ( 954 4716228
Name of Contact Person	Area Code & Daytime Telephone Number
Enclosed is a check for the following amoun	t made payable to the Florida Department of State:
■ \$35 Filing Fee □\$43.75 Filing Fee Certificate of S	· · · · · · · · · · · · · · · · · · ·
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 to Articles of Incorporation of

IGNUS ADVANCES CORP

(Name of Corporation as currently	filed with the Florida Dept. of State)
P24000046736	,
(Document Number of 0	Corporation (if known)
ursuant to the provisions of section 607.1006, Florida Statutes, this Fits Articles of Incorporation:	Torida Profit Corporation adopts the following amendment(s)
. If amending name, enter the new name of the corporation:	
GNUS ADVANCE CORP	The new
ame 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."	
B. Enter new principal office address, if applicable: Principal office address MUST BE A STREET ADDRESS )	
Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)	
. If amending the registered agent and/or registered office address:  Name of New Registered Agent	ess in Florida, enter the name of the
name of New Negistered Agent	
(Florida stree	ot othrassi
ii sortaa siree	a seed cody
New Registered Office Address:	, Florida
IV.	City) (Zip Code)
iew Registered Agent's Signature, if changing Registered Agent: hereby accept the appointment as registered agent. I am familiar with	ith and accept the obligations of the position.
Cinnettan CN B.	gistered Agent, if changing
Signature of New Reg	gisierea Ageni, ij changing

☐ 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>sv</u>	Sally Smith	
Type of Action (Check One)	<u>Title</u>	<u>Name</u>	<u>Addres</u> s
1) Change			
Add			
Remove			
2) Change	<del></del>	<del></del>	
Add			
Remove 3) Change			
Add			
Remove			
4) Change			
Add			
Remove			
5) Change			
Add			<u> </u>
Remove			
6) Change			<u> </u>
Add			
Remove			

	adding additional Arti ll sheets, if necessary).	(Be specific)	<u> </u>		
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f an amendmer	t provides for an exch	ange reclassification	on or concellation	of issued shares	
	mplementing the amer				
provisions for	icable, indicate N/A)				
(if not appl					
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	07/29/2024	
The date of each amendment(s)	adoption:	, if other than the
date this document was signed.		
	1/29/2024	
Effective date if applicable:		
	(no more than 90 d	ays after amendment file date)
Note: If the date inserted in this document's effective date on the	block does not meet the applicab Department of State's records.	le statutory filing requirements, this date will not be listed as the
Adoption of Amendment(s)	(CHECK ONE)	
■ The amendment(s) was/were a action was not required.	dopted by the incorporators, or boa	rd of directors without shareholder action and shareholder
he amendment(s) was/were a by the shareholders was/were		umber of votes cast for the amendment(s)
	pproved by the shareholders throug or each voting group entitled to vot	th voting groups. The following statement e separately on the amendment(s):
"The number of votes ca	st for the amendment(s) was/were s	sufficient for approval
by		
•	(voting group)	
07/29/20	024	
Dated		<u></u>
Signature .	Faut .	
	director president or other officer	- if directors or officers have not been
		ands of a receiver, trustee, or other court
	inted fiduciary by that fiduciary)	ands of a receiver, trustee, of other count
арро	inted fiederary by that fiederary)	
	JAASIEL D GARCES CHIRIN	IOS
	(Typed or printed nar	ne of person signing)
	PRESIDENT	
	(Title of person signi	ng)